

## Appendix 7A: WTPY Interpretation Guide

### General

The Wire Third-Party Query System (WTPY) is the primary method of verifying the Social Security Number and receipt of Social Security, SSI, and Medicare benefits. This Appendix provides a complete description of all fields of information on the WTPY.

### Types of WTPY

There are three types of WTPYS.

- Title II is Retirement, Survivors, and Disability Insurance (RSDI) benefits.
- Title XVI is Supplemental Security Income (SSI) benefits for the aged, blind, or disabled.
- Forty Qualifying Quarters for verifying exceptions to sponsor deemed income (MS 706.F).

### Requesting a WTPY

Follow the instructions below to request a WTPY.

Using the KC220	
Step	Action
1	Ensure the name, date of birth, and social security number fields are complete.
2	Enter <b>Y</b> in the GEN WTPY field and press enter.
3	The system displays the words “WTPY GENERATED” at the top of the screen.
4	If you request the WTPY before 3:00 p.m., the system prints the WTPY the next day. If you request the WTPY after 3:00 p.m., the system prints the WTPY the day after the next day.

Using SVES	
Step	Action
1	From anywhere in KEDS, enter SV000 at the NTR field or go to the Main Menu and enter option 19. This brings you to the AHCCCS – WTPY Main Menu.
2	Type <b>2</b> in the SELECT OPTION field. This brings you to the WTPY – Add Request screen.
3	Enter the requested information and press enter.  NOTE: If you are requesting information on 40 Qualifying Quarters, you need to change the “N” to a “Y” in the 40QQ Requested field. If you forgot to change this, you must delete the WTPY request from the SV110 and create a new request.
4	The System displays the words “WTPY GENERATED” at the top of the screen.
5	Usually, the system prints the WTPY the next day.

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## Appendix 7A: WTPY Interpretation Guide, Continued

**Title II WTPY** The following is an example of a Title II WTPY.

(1) TITLE II	
RESPONSE DATE: XX/XX/XX (2)	(3) SSN: 600-00-0000 ID-BROWN (4)
VERIFICATION CODE: V-SSN IS VERIFIED (5)	
REQUESTER: INTERVIEWER, ELIG (6)	
INPUT SSN: 600-00-0000 (7)	NAME: Y BROWN (8) USER CODE: 003-H-074 (9)
WTPY CONFIDENTIAL SOCIAL SECURITY DATA - CLAIM NUMBER: 123-45-6789C01 (10)	
INDIVIDUAL'S OWN SOCIAL SECURITY NUMBER: 600-00-0000 (11)	
BROWN, YOLANDA (12)	FEMALE (13) BORN: 11/02/84 (14) ENTITLED: 06/91 (15) DIED: (16)
JAMES BROWN FOR (17)	YOLANDA BROWN 12345 N. 55 AVE. 85304
PAYMENT STATUS CODE: C -CURRENT PAYMENT STATUS (EXCEPT RAILROAD) (18)	
NET MONTHLY BENEFIT IF PAYABLE: 541.00 (19)	
SPECIAL PAY DATE: (20)	PRIOR DUE AMOUNT: 0.00 (21)
SPECIAL MONTHLY PAYMENT: 0.00 (22)	
BLACK LUNG PAYMENT STATUS CODE: (23)	(24) 0.00
DUAL ENTITLEMENT NUMBER: (25)	
***** BENEFIT HISTORY *****	
DATE	GROSS BENEFIT
12/99 (26)	\$ 541.00 CREDITED
12/98	\$ 529.00 CREDITED
12/97	\$ 522.00 CREDITED
MEDICARE DATA	ENTITLED TERMINATED PREMIUM BUY-IN CODE START STOP
HOSPITAL INSURANCE	(27) (28) (29) 0.00 (30) (31) (32) (33)
SUPPLEMENTAL INSURANCE	0.00
DATE DISABILITY BEGAN: (34)	
DEFERRED PAY DATE: (35)	PROOF OF AGE: B-BIRTH/BAPTISMAL CERTIFICATE (36)
DATE OF INIT ENTITLEMENT: 12/84 (37)	DATE OF SUSP OR TERM: (38)
ASSIST CODE: A-AGED (39)	RR BENE IND: (40)
XREF ACCOUNT NUMBER INFORMATION	
ENTITLEMENT # BIC CODE	
(41)	

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## Appendix 7A: WTPY Interpretation Guide, Continued

### Title II WTPY Fields

The numbered fields on the sample WTPY correspond to the numbered fields in the interpretation guide.

Field	Description																				
1	The type of benefits being received. Title II is Retirement, Survivors, and Disability Insurance (RSDI) benefits.																				
2	The date the WTPY reply is generated.																				
3	The social security number input by the requester.																				
4	The first five letters of the person's last name on whom a request was sent.																				
5	Indicates if the social security number input by the requester is matched with a number in the SSA database and if it is verified.  <table> <tr> <th>Code</th><th>Description</th></tr> <tr> <td>V</td><td>SSN verified</td></tr> <tr> <td>F</td><td>SSN verified by ignoring the last name</td></tr> <tr> <td>*</td><td>A more accurate SSN was found</td></tr> <tr> <td>1</td><td>Impossible SSN on Numident</td></tr> <tr> <td>M</td><td>SSN found although such number impossible on Numident</td></tr> <tr> <td>3</td><td>Date of birth wrong</td></tr> <tr> <td>P</td><td>Date of birth wrong, but birthdate match found on MBR/SSR</td></tr> <tr> <td>5</td><td>Name Wrong</td></tr> <tr> <td>R</td><td>Name wrong, but a name match found on MBR/SSR</td></tr> </table>	Code	Description	V	SSN verified	F	SSN verified by ignoring the last name	*	A more accurate SSN was found	1	Impossible SSN on Numident	M	SSN found although such number impossible on Numident	3	Date of birth wrong	P	Date of birth wrong, but birthdate match found on MBR/SSR	5	Name Wrong	R	Name wrong, but a name match found on MBR/SSR
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P	Date of birth wrong, but birthdate match found on MBR/SSR																				
5	Name Wrong																				
R	Name wrong, but a name match found on MBR/SSR																				
6	The requester's name.																				
7	The social security number input by the requester.																				
8	The first initial and the first five letters of the last name as input by the requester.																				
9	Identifies the requester. Arizona's State Agency Code is 003 and H is the category of assistance. The last three letters are the requester's user ID. The system automatically enters these codes when you request a WTPY.																				
10	The WTPY response contains information that must be kept confidential. The social security or claim number listed is the number taken from SSA records. The Beneficiary Identification Code (BIC) is the 1 to 3 digits after the social security number. See BIC Codes below.																				
11	This is the individual's own social security number, if available. It is repeated even if it was used as the input number for the WTPY request. The individual's own SSN is also given when a claim number has been used as the input number on the WTPY request.																				

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## Appendix 7A: WTPY Interpretation Guide, Continued

### Title II WTPY Fields (continued)

Field	Description																														
12	The last and first name of the recipient.																														
13	The gender of the recipient, displayed as either male or female. If the gender is unknown, nothing will be displayed.																														
14	The recipient's date of birth. If the individual is currently receiving benefits, use the WTPY to verify age. If there is a discrepancy between the WTPY and the birth certificate, use the date on the birth certificate. If there is a discrepancy between the WTPY and the date on the application, use the date on the WTPY.																														
15	The month and year of the recipient's current period of entitlement.																														
16	The recipient's date of death, if appropriate or known.																														
17	The name and mailing address of the person to whom the check is being sent. If the check is being directly deposited into a financial institution, the recipient's (or representative payee's) regular mailing address is shown.																														
18	Indicates the current payment status.  <table> <tr> <th><u>Code</u></th><th><u>Description</u></th></tr> <tr> <td>A</td><td>Benefits In Adjustment</td></tr> <tr> <td>B</td><td>Benefits In Abatement</td></tr> <tr> <td>C</td><td>Benefits Paid</td></tr> <tr> <td>D</td><td>Benefits Deferred Until MM/YY</td></tr> <tr> <td>E</td><td>Benefits Payable Through Railroad Board</td></tr> <tr> <td>J</td><td>Benefits To Be Paid In MM/YY</td></tr> <tr> <td>N</td><td>Benefits Disallowed Or Denied</td></tr> <tr> <td>P</td><td>Benefits Pending Adjudication</td></tr> <tr> <td>R</td><td>Benefits In Kill Credit</td></tr> <tr> <td>S</td><td>Benefits Suspended In MM/YY</td></tr> <tr> <td>T</td><td>Benefits Terminated In MM/YY</td></tr> <tr> <td>U</td><td>Only Title XVIII Entitlement Is Active</td></tr> <tr> <td>W</td><td>Claim Withdrawn Before Entitlement</td></tr> <tr> <td>X</td><td>Title XVIII Adjustment Or Termination In MM/YY</td></tr> </table>	<u>Code</u>	<u>Description</u>	A	Benefits In Adjustment	B	Benefits In Abatement	C	Benefits Paid	D	Benefits Deferred Until MM/YY	E	Benefits Payable Through Railroad Board	J	Benefits To Be Paid In MM/YY	N	Benefits Disallowed Or Denied	P	Benefits Pending Adjudication	R	Benefits In Kill Credit	S	Benefits Suspended In MM/YY	T	Benefits Terminated In MM/YY	U	Only Title XVIII Entitlement Is Active	W	Claim Withdrawn Before Entitlement	X	Title XVIII Adjustment Or Termination In MM/YY
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A	Benefits In Adjustment																														
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D	Benefits Deferred Until MM/YY																														
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R	Benefits In Kill Credit																														
S	Benefits Suspended In MM/YY																														
T	Benefits Terminated In MM/YY																														
U	Only Title XVIII Entitlement Is Active																														
W	Claim Withdrawn Before Entitlement																														
X	Title XVIII Adjustment Or Termination In MM/YY																														
19	The amount of the check the recipient receives after premium deductions or overpayment adjustment, if appropriate. An amount may be shown here even if not payable. See the payment status code above to see if payable.																														
20	The date that any prior due amount or special payments are made.																														
21	The amount of any prior due payments made.																														

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## Appendix 7A: WTPY Interpretation Guide, Continued

### Title II WTPY Fields (continued)

Field	Description														
22	<p>If this field shows an amount, it indicates:</p> <ul style="list-style-type: none"> <li>• Payment is resumed after a period of suspense or deferral, effective with the month shown in the special pay date;</li> <li>• A change in benefit rate. This could be the result of a Medicare premium change or Medicare buy-in. If the change is retroactive, any additional amount due for retroactive months is included in the special monthly payment. In the rare situation where benefits are being reduced retroactively, the amount of the payment will be correspondingly lower. The effective date of the change in the amount can be determined from the history field which indicates a change in the amount; or</li> <li>• Method of payment change (e.g., direct deposit started or stopped).</li> </ul>														
23	<p>The recipient's present black lung payment status as pay or nonpay. The code listed just before "PAY" or "NONPAY" gives a further explanation. The codes are:</p> <table> <tr> <th><u>Code</u></th><th><u>Description</u></th></tr> <tr> <td>N</td><td>Nonpayment Status</td></tr> <tr> <td>E</td><td>Entitled</td></tr> <tr> <td>P</td><td>Pending Black Lung Entitlement</td></tr> <tr> <td>T</td><td>Terminated</td></tr> <tr> <td>D</td><td>Terminated due to Death</td></tr> <tr> <td>Blank</td><td>Not applicable</td></tr> </table>	<u>Code</u>	<u>Description</u>	N	Nonpayment Status	E	Entitled	P	Pending Black Lung Entitlement	T	Terminated	D	Terminated due to Death	Blank	Not applicable
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N	Nonpayment Status														
E	Entitled														
P	Pending Black Lung Entitlement														
T	Terminated														
D	Terminated due to Death														
Blank	Not applicable														
24	The amount of black lung payments paid to a miner or widow and includes all benefits due a family in the same household.														

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## Appendix 7A: WTPY Interpretation Guide, Continued

### Title II WTPY Fields (continued)

Field	Description						
25	<p>Another SSN, followed by the BIC, on which the recipient may be entitled. If a dual entitlement number appears on the initial response, the system automatically requests a WTPY using that number to obtain information regarding any benefits the individual may be entitled to on the other number.</p> <table border="1"> <tr> <th>If the benefits are paid in...</th><th>Then...</th></tr> <tr> <td>One check</td><td>The payment status code in one of the responses will show AD-BENEFITS IN ADJUSTMENT and the most recent date in benefit history will show the amount NOT CREDITED. The other response will include the total combined Title II benefits, and the payment status code will indicate whether the payment is being made.</td></tr> <tr> <td>More than one check</td><td>the amounts in the benefit history and net monthly benefits will include only the benefits for the claim number shown in field 10.</td></tr> </table>	If the benefits are paid in...	Then...	One check	The payment status code in one of the responses will show AD-BENEFITS IN ADJUSTMENT and the most recent date in benefit history will show the amount NOT CREDITED. The other response will include the total combined Title II benefits, and the payment status code will indicate whether the payment is being made.	More than one check	the amounts in the benefit history and net monthly benefits will include only the benefits for the claim number shown in field 10.
If the benefits are paid in...	Then...						
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More than one check	the amounts in the benefit history and net monthly benefits will include only the benefits for the claim number shown in field 10.						
26	<p>A new benefit history entry is established every time there is a change in payment status or benefit rate. Entries are shown for the last nine occurrences. Each benefit history entry consists of the following:</p> <p><u>DATE</u>: This is the effective date of a benefit history change. This is the date the change should have been made, regardless of when it was actually made.</p> <p><u>GROSS BENEFIT</u>: This is the amount of the benefit after rounding (before any Medicare premium deduction) as of the effective date. NOT CREDITED indicates that the benefit was not paid or should not have been paid. CREDITED indicates that a benefit was paid or that a benefit was due but may have been used to recover an overpayment.</p>						
27	The date the recipient is entitled to hospital insurance (Medicare Part A) or supplemental insurance (Medicare Part B).						
28	The date that Medicare Part A or Part B is terminated.						
29	The premium amount being paid or deducted from the benefit check.						
30	Indicates if another person or organization is paying the premium.						

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## Appendix 7A: WTPY Interpretation Guide, Continued

### Title II WTPY Fields (continued)

Field	Description																				
31	The code that indicates who is paying the premium. Code 030 is the State of Arizona.																				
32	The date (month and year) that the other person or organization started paying the premium.																				
33	The date (month and year) that the other person or organization stopped paying the premium.																				
34	The date the recipient's disability began as established by the Social Security Administration. This appears only for a disabled recipient.																				
35	The month and year the first or next payment can be made.																				
36	The documents SSA used to verify age. If the individual is receiving benefits, use the WTPY to verify age.																				
37	Date the recipient was originally entitled to benefits. This date can be before the ENTITLED date in field 15.																				
38	The date benefits were suspended or terminated. The reason the benefits were suspended or terminated is in field 18.																				
39	Information that was provided by the state to the Social Security Administration and reported back. Do not use this for verification.  <table> <tr> <th><u>Code</u></th><th><u>Description</u></th></tr> <tr> <td>A</td><td>Aged</td></tr> <tr> <td>B</td><td>Blind</td></tr> <tr> <td>C</td><td>AFDC</td></tr> <tr> <td>D</td><td>Disabled</td></tr> <tr> <td>F</td><td>Food Stamps</td></tr> <tr> <td>H</td><td>Health Maintenance</td></tr> <tr> <td>I</td><td>Income Maintenance</td></tr> <tr> <td>N</td><td>Title XIX Medicaid Eligibility</td></tr> <tr> <td>S</td><td>Statement of Consent</td></tr> </table>	<u>Code</u>	<u>Description</u>	A	Aged	B	Blind	C	AFDC	D	Disabled	F	Food Stamps	H	Health Maintenance	I	Income Maintenance	N	Title XIX Medicaid Eligibility	S	Statement of Consent
<u>Code</u>	<u>Description</u>																				
A	Aged																				
B	Blind																				
C	AFDC																				
D	Disabled																				
F	Food Stamps																				
H	Health Maintenance																				
I	Income Maintenance																				
N	Title XIX Medicaid Eligibility																				
S	Statement of Consent																				
40	Indicates whether Railroad Retirement benefits are active or terminated.																				

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## Appendix 7A: WTPY Interpretation Guide, Continued

### Title II WTPY Fields (continued)

Field	Description																														
41	Other claim numbers to which the recipient may be entitled, including the BIC and the Cross Reference Code. See field 10 for a description of BIC codes. Cross Reference Codes are listed below.																														
	<table> <tr> <th><u>Code</u></th><th><u>Description</u></th></tr> <tr> <td>A</td><td>MAFDUP selection precluded (possible duplicate Social Security number (SSN) has already been investigated)</td></tr> <tr> <td>C</td><td>Civil Service number</td></tr> <tr> <td>D</td><td>Dual wage record number</td></tr> <tr> <td>E</td><td>Simultaneous entitlement number</td></tr> <tr> <td>F</td><td>Multiple SSN from claims automated processing system (CAPS)</td></tr> <tr> <td>G</td><td>Multiple SSN from automatic reappraisal military service and multiple account numbers (ARMSMULT)</td></tr> <tr> <td>H</td><td>Multiple SSN from program service center (PSC) or central office correction</td></tr> <tr> <td>L</td><td>Black Lung benefits number</td></tr> <tr> <td>M</td><td>Multiple SSN</td></tr> <tr> <td>O</td><td>Potential or actual entitlement number</td></tr> <tr> <td>S</td><td>Spouse's SSN</td></tr> <tr> <td>U</td><td>SSN upon which renal entitlement is based</td></tr> <tr> <td>V</td><td>Second validated beneficiary's own Social Security number/beneficiary's own account number (BOSSN/BOAN)</td></tr> <tr> <td>W</td><td>State welfare case number</td></tr> </table>	<u>Code</u>	<u>Description</u>	A	MAFDUP selection precluded (possible duplicate Social Security number (SSN) has already been investigated)	C	Civil Service number	D	Dual wage record number	E	Simultaneous entitlement number	F	Multiple SSN from claims automated processing system (CAPS)	G	Multiple SSN from automatic reappraisal military service and multiple account numbers (ARMSMULT)	H	Multiple SSN from program service center (PSC) or central office correction	L	Black Lung benefits number	M	Multiple SSN	O	Potential or actual entitlement number	S	Spouse's SSN	U	SSN upon which renal entitlement is based	V	Second validated beneficiary's own Social Security number/beneficiary's own account number (BOSSN/BOAN)	W	State welfare case number
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S	Spouse's SSN																														
U	SSN upon which renal entitlement is based																														
V	Second validated beneficiary's own Social Security number/beneficiary's own account number (BOSSN/BOAN)																														
W	State welfare case number																														

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## Appendix 7A: WTPY Interpretation Guide, Continued

**Title XVI**      The following is an example of a Title XVI WTPY.  
**WTPY**

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      1      TITLE XVI

RESPONSE DATE: XX/XX/XX 2      SSN: 527-11-8656 3      ID- RUTH 4
VERIFICATION CODE: V-SSN IS VERIFIED 5

      REQUESTER: INTERVIEWER, ELIG 6
INPUT SSN: 999-99-9999 7 NAME: B RUTH 8      USER CODE: 003-H-031 9

WTPY QUERY CONFIDENTIAL SUPPLEMENTAL SECURITY INCOME DATA ON: 527-11-8656 10
RUTH, BABY 11      FEMALE 12      BORN: 10/30/01 13      ENTITLED: 10/75 14      DIED: 15
APPLICATION DATE: 10/01/75 16      TYPE OF PERSON: AI-AGED INDIVIDUAL 17
CITIZEN/ALIEN CODE: 18      RESIDENCY: 19

MAILING ADDRESS:      ATTN:
JAN RUTH FOR 20      BABY RUTH      801 E JEFFERSON      PHOENIX AZ 85002
RESIDENCE: 21

NET CURRENT BENIFIT FOR: XX/XX/XX 22      FED AMT: 79.00      STATE AMT: 24      .00

***** PAYMENT HISTORY OF NET BENFITS PAID *****
DATE      FEDERAL AMT      STATE AMT      TYPE OF PAYMENT
01/01/00 25      79.00 26      .00 27      1-RECURRING 28      N 29
01/01/99      75.00      .00      1-RECURRING      N

PAYMENT STATUS CD: C01-CURRENT PAY 30      DATE: 10/75 31
DISABILITY STATUS: 32
ESS PER: 0 33      APPEAL CD: 34      DATE: 35      DECISION:      REC EST DATE: 02/02/9X 36
DEATH SRC CODE: 37      RACE: W 38      OTHER NAME: 39      ***** RESOURCE CODES *****
MEDICAID EFF DATE: 41      COUNTRY: 42      HOUSE: Z CAR: Z INS: Z PROP: Z OTH: Z 40
TEL: 43      -      -      3RD PTY INS: Y 44      UNPD MED EXP: N 45      DENIAL CD: 46      DENIAL DT: 47
***** FOOD STAMP INFORMATION *****      DISABILITY ONSET DATE: 48
DATE: 49      APP SEC: N 50      STATUS: N 51      OVER/UNDER IND 52

***** UNEARNED INCOME INFORMATION *****
TYPE VER START STOP AMOUNT FREQ IDENT NUMBER
53 A 54 2 55 01/00 56 442.00 C 58 527-11-8656A 59
R 0 08/98 57 3.00 C INTEREST

** REP PAYEE INFORMATION ** ADV PAY INFORMATION *RETRO MONTHLY ACCOUNT INFO**
IND SEL DATE CUST COMP TYPE IND DATE AMOUNT LIV EARNED UNEARNED DEEMED
60 61 62 63 64 65 66 67 68 69 70 71
REIM CODE: 72 LAST TR TYPE: MB 73 LAST TR DATE: 11/23/XX 74

MULTIPLE SSN: 75      /      /      /      /

MEDICAID ELIGIBILITY: Y 76      MEDICAID TEST INDICATOR: 77

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## Appendix 7A: WTPY Interpretation Guide, Continued

### Title XVI WTPY Fields

The numbered fields on the sample WTPY correspond to the numbered fields in the interpretation guide.

Field	Description																				
1	The type of benefits being received. Title XVI is Supplemental Security Income (SSI) benefits for the aged, blind, or disabled.																				
2	The date the WTPY reply is generated.																				
3	The social security number input by the requester.																				
4	The first five letters of the person's last name on whom a request was sent.																				
5	Indicates if the social security number input by the requester is matched with a number in the SSA database and if it is verified.  <table> <tr> <th>Code</th><th>Description</th></tr> <tr> <td>V</td><td>SSN verified</td></tr> <tr> <td>F</td><td>SSN verified by ignoring the last name</td></tr> <tr> <td>*</td><td>A more accurate SSN was found</td></tr> <tr> <td>1</td><td>Impossible SSN on Numident</td></tr> <tr> <td>M</td><td>SSN found although such number impossible on Numident</td></tr> <tr> <td>3</td><td>Date of birth wrong</td></tr> <tr> <td>P</td><td>Date of birth wrong, but birthdate match found on MBR/SSR</td></tr> <tr> <td>5</td><td>Name Wrong</td></tr> <tr> <td>R</td><td>Name wrong, but a name match found on MBR/SSR</td></tr> </table>	Code	Description	V	SSN verified	F	SSN verified by ignoring the last name	*	A more accurate SSN was found	1	Impossible SSN on Numident	M	SSN found although such number impossible on Numident	3	Date of birth wrong	P	Date of birth wrong, but birthdate match found on MBR/SSR	5	Name Wrong	R	Name wrong, but a name match found on MBR/SSR
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P	Date of birth wrong, but birthdate match found on MBR/SSR																				
5	Name Wrong																				
R	Name wrong, but a name match found on MBR/SSR																				
6	The requester's name.																				
7	The social security number input by the requester.																				
8	The first initial and the first five letters of the last name as input by the requester.																				
9	Identifies the requester. Arizona's State Agency Code is 003 and H is the category of assistance. The last three letters are the requester's user ID. The system automatically enters these codes when you request a WTPY.																				
10	A WTPY response contains information that must be kept confidential. The social security or claim number listed is the number taken from SSA records. The Beneficiary Identification Code (BIC) is the 1 to 3 digits after the social security number. BIC codes are listed in field 10 of the Title II field descriptions.																				
11	The last and first name of the recipient.																				
12	The gender of the recipient, displayed as either male or female. If the gender is unknown, the field is blank.																				

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## Appendix 7A: WTPY Interpretation Guide, Continued

### Title XVI WTPY Fields (continued)

Field	Description																				
13	The recipient's date of birth.																				
14	The month and year of the recipient's current period of entitlement.																				
15	The recipient's date of death, if appropriate or known.																				
16	The date the recipient applied for SSI benefits.																				
17	<p>The type of person receiving benefits. If a recipient is initially disabled, this code does not change at age 65.</p> <table> <tr> <th><u>Code</u></th><th><u>Description</u></th></tr> <tr> <td>AI</td><td>Aged Individual</td></tr> <tr> <td>AS</td><td>Aged Spouse</td></tr> <tr> <td>BI</td><td>Blind Individual</td></tr> <tr> <td>BC</td><td>Blind Child</td></tr> <tr> <td>DC</td><td>Disabled Child</td></tr> <tr> <td>DI</td><td>Disabled Individual</td></tr> <tr> <td>DS</td><td>Disabled Spouse</td></tr> <tr> <td>EP</td><td>Essential Person</td></tr> <tr> <td>XS</td><td>Ineligible Spouse</td></tr> </table>	<u>Code</u>	<u>Description</u>	AI	Aged Individual	AS	Aged Spouse	BI	Blind Individual	BC	Blind Child	DC	Disabled Child	DI	Disabled Individual	DS	Disabled Spouse	EP	Essential Person	XS	Ineligible Spouse
<u>Code</u>	<u>Description</u>																				
AI	Aged Individual																				
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*Continued on next page*

## Appendix 7A: WTPY Interpretation Guide, Continued

### Title XVI WTPY Fields (continued)

Field	Description																																																						
18	<p>The recipient's citizenship or alien status.</p> <table> <tr> <th>Code</th><th>Description</th></tr> <tr> <td>1</td><td>No status alleged</td></tr> <tr> <td>2</td><td>Valid status alleged, but not verified</td></tr> <tr> <td>A</td><td>Verified U.S. citizen</td></tr> <tr> <td>B</td><td>Alleged U.S. citizen</td></tr> <tr> <td>C</td><td>U.S. citizen born outside the U.S.</td></tr> <tr> <td>D</td><td>Alleged U.S. citizen, resident since 1/1/72</td></tr> <tr> <td>E</td><td>Citizenship/alien status not proven; denied for other reason</td></tr> <tr> <td>F</td><td>Refugee</td></tr> <tr> <td>G</td><td>Parolee</td></tr> <tr> <td>H</td><td>Silva vs. Levi Alien</td></tr> <tr> <td>I</td><td>Indochinese Refugee</td></tr> <tr> <td>J</td><td>Deferred action</td></tr> <tr> <td>K</td><td>Lawful Permanent Resident</td></tr> <tr> <td>L</td><td>Asylee</td></tr> <tr> <td>N</td><td>Citizenship verified by Numident</td></tr> <tr> <td>P</td><td>Alien lawfully admitted before 1/1/72</td></tr> <tr> <td>Q</td><td>Alleged U.S. citizen; also shown on Numident</td></tr> <tr> <td>R</td><td>Legal Temporary Resident</td></tr> <tr> <td>S</td><td>Lawful Permanent Resident</td></tr> <tr> <td>T</td><td>Alien granted voluntary departure</td></tr> <tr> <td>U</td><td>Unknown</td></tr> <tr> <td>W</td><td>Alien granted stay of deportation</td></tr> <tr> <td>X</td><td>Cuban/Haitian entrant</td></tr> <tr> <td>Y</td><td>Legalized agricultural worker</td></tr> <tr> <td>Z</td><td>Immediate relative petition has been approved</td></tr> <tr> <td>*</td><td>Unreadable transmission</td></tr> </table>	Code	Description	1	No status alleged	2	Valid status alleged, but not verified	A	Verified U.S. citizen	B	Alleged U.S. citizen	C	U.S. citizen born outside the U.S.	D	Alleged U.S. citizen, resident since 1/1/72	E	Citizenship/alien status not proven; denied for other reason	F	Refugee	G	Parolee	H	Silva vs. Levi Alien	I	Indochinese Refugee	J	Deferred action	K	Lawful Permanent Resident	L	Asylee	N	Citizenship verified by Numident	P	Alien lawfully admitted before 1/1/72	Q	Alleged U.S. citizen; also shown on Numident	R	Legal Temporary Resident	S	Lawful Permanent Resident	T	Alien granted voluntary departure	U	Unknown	W	Alien granted stay of deportation	X	Cuban/Haitian entrant	Y	Legalized agricultural worker	Z	Immediate relative petition has been approved	*	Unreadable transmission
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*	Unreadable transmission																																																						
19	<p>The month and year the alien's residency began for codes F-L. Before early October 1980, only the year of residency was input. These years were converted to the month of January for the applicable year; e.g., "75 was converted to "01/75." An entry of "01/74" means residency began in 1974 or earlier. For all other dates after September 1980, it is the actual month and year.</p>																																																						
20	<p>The name and mailing address of the person to whom the check is being sent. If the check is being directly deposited into a financial institution, the recipient's (or representative payee's) regular mailing address is shown.</p>																																																						

*Continued on next page*

## Appendix 7A: WTPY Interpretation Guide, Continued

### Title XVI WTPY Fields (continued)

Field	Description																																				
21	The recipient's residential address, if different from the mailing address.																																				
22	The most current date for the amounts that follow. This line does not display for recently established records when the month of the first payment shown in the payment history is the first or the second calendar month following the month of the WTPY request.																																				
23	The Federal amount due the recipient. This includes zero amounts.																																				
24	The State supplemental amount due the recipient. This includes zero amounts. The State of Arizona does not supplement SSI. If there is an amount in this field, the recipient is receiving it from another State.																																				
25	The date of receipt, if the date shown is the first of the month. If the date is the second or later of the month, it represents a check generated late in the month.																																				
26	The actual Federal amount paid.																																				
27	This is the actual State amount paid.																																				
28	<p>The type of payment made to the recipient.</p> <table> <tr> <th><u>Type of Payment</u></th><th><u>Description</u></th></tr> <tr> <td>RECURRING</td><td>First of the month check. The actual payment could be dated the last of the prior month when the first is a Saturday, Sunday or holiday.</td></tr> <tr> <td>OVERPAYMENT</td><td>Amount retained by SSA to cover any overpayments made previously.</td></tr> <tr> <td>RECOVERY</td><td>The check is returned.</td></tr> <tr> <td>RETURNED</td><td>The check was lower than the normal amount received.</td></tr> <tr> <td>REGULAR</td><td>A special payment for the current month only was made.</td></tr> <tr> <td>UNDERPAYMENT</td><td>A special payment was made.</td></tr> <tr> <td>SPECIAL</td><td>Self-explanatory.</td></tr> <tr> <td>CURRENT</td><td>A substitute check was issued.</td></tr> <tr> <td>MONTH ONLY</td><td>Both original and substitute check were issued.</td></tr> <tr> <td>SPECIAL</td><td>SSA district office controlled the issuance of the check (force pay).</td></tr> <tr> <td>NONE MADE</td><td>Interim assistance reimbursement</td></tr> <tr> <td>SUBSTITUTE</td><td>payment made to welfare agency.</td></tr> <tr> <td>DUPLICATE</td><td></td></tr> <tr> <td>D O</td><td></td></tr> <tr> <td>CONTROLLED</td><td></td></tr> <tr> <td>IAR</td><td></td></tr> <tr> <td>REIMBURSEMENT</td><td></td></tr> </table>	<u>Type of Payment</u>	<u>Description</u>	RECURRING	First of the month check. The actual payment could be dated the last of the prior month when the first is a Saturday, Sunday or holiday.	OVERPAYMENT	Amount retained by SSA to cover any overpayments made previously.	RECOVERY	The check is returned.	RETURNED	The check was lower than the normal amount received.	REGULAR	A special payment for the current month only was made.	UNDERPAYMENT	A special payment was made.	SPECIAL	Self-explanatory.	CURRENT	A substitute check was issued.	MONTH ONLY	Both original and substitute check were issued.	SPECIAL	SSA district office controlled the issuance of the check (force pay).	NONE MADE	Interim assistance reimbursement	SUBSTITUTE	payment made to welfare agency.	DUPLICATE		D O		CONTROLLED		IAR		REIMBURSEMENT	
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*Continued on next page*

## Appendix 7A: WTPY Interpretation Guide, Continued

### Title XVI WTPY Fields (continued)

Field	Description																																																
29	<p>The period for which an underpayment or one time payment was made, or for which an underpayment was withheld to collect an overpayment, advance payment, or special payment.</p> <table> <tr> <th><u>Code</u></th><th><u>Description</u></th></tr> <tr> <td>E</td><td>Total of Title II underpayment check.</td></tr> <tr> <td>F</td><td>Force payment</td></tr> <tr> <td>N</td><td>Force payment not involved or total of Title II and Title XVI one time payment check</td></tr> <tr> <td>S</td><td>Force payment to zero</td></tr> <tr> <td>T</td><td>Record termination</td></tr> <tr> <td>U</td><td>Formerly used to designate a one-time payment</td></tr> </table>	<u>Code</u>	<u>Description</u>	E	Total of Title II underpayment check.	F	Force payment	N	Force payment not involved or total of Title II and Title XVI one time payment check	S	Force payment to zero	T	Record termination	U	Formerly used to designate a one-time payment																																		
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*Continued on next page*

## Appendix 7A: WTPY Interpretation Guide, Continued

### Title XVI WTPY Fields (continued)

Field	Description	
30 (cont.)	<u>Code</u>	<u>Description</u>
	N12	Non-pay - Voluntarily Withdrew In
	N13	Non-pay - Not Citizen Or Eligible Alien In
	N14	Non-pay - Not Age 65 In
	N15	Non-pay - Not Blind In
	N16	Non-pay - Not Disabled In
	N17	Non-pay - Failed To Pursue Claim Effective
	N18	Non-pay - Failed To Cooperate Effective
	N19	Non-pay - Voluntary Termination Effective
	N20	Non-pay - Failed To Provide Required Report Effective
	N27	Non-pay - Disability Ceased (SGA) Effective
	N30	Non-pay - Medical Denial In
	N31	Non-pay - Medical Denial In
	N32	Non-pay - Medical Denial In
	N33	Non-pay - Medical Denial In
	N34	Non-pay - Medical Denial In
	N35	Non-pay - Medical Denial In
	N36	Non-pay - Medical Denial In
	N37	Non-pay - Medical Denial In
	N38	Non-pay - Medical Denial In
	N39	Non-pay - Medical Denial In
	N40	Non-pay - Medical Denial In
	N41	Non-pay - Medical Denial In
	N42	Non-pay - Medical Denial In
	N43	Non-pay - Medical Denial In
	N44	Non-pay - Medical Denial In
	N45	Non-pay - Medical Denial In
	N46	Non-pay - Medical Denial In
	N47	Non-pay - Medical Denial In
	N48	Non-pay - Medical Denial In
	N49	Non-pay - Medical Denial In
	N50	Non-pay - Refused Medical Treatment Effective
	N51	Non-pay - Medical Denial In
	N52	Non-pay - Deleted From State Rolls Before 1/73*
	N53	Non-pay - Deleted From State Rolls After 1/73*
	N54	Non-pay - Whereabouts Unknown In

*Continued on next page*

## Appendix 7A: WTPY Interpretation Guide, Continued

### Title XVI WTPY Fields (continued)

Field	Description																																						
30 (cont.)	<table> <tr> <th>Code</th><th>Description</th></tr> <tr> <td>S01</td><td>Suspended - Recipient Deceased</td></tr> <tr> <td>S04</td><td>Suspended - Disability Decision Pending</td></tr> <tr> <td>S05</td><td>Suspended - Disability Decision Pending</td></tr> <tr> <td>S06</td><td>Suspended - Address Unknown In</td></tr> <tr> <td>S07</td><td>Suspended - Check Returned In</td></tr> <tr> <td>S08</td><td>Suspended - Rep Payee Issue Effective</td></tr> <tr> <td>S09</td><td>Suspended - Temporary Institutionalization Effective</td></tr> <tr> <td>S10</td><td>Suspended - Recipient Refuses Direct Deposit</td></tr> <tr> <td>S20</td><td>3 Presumptive Payments Made - Suspended Effective</td></tr> <tr> <td>S21</td><td>3 Presumptive Payments Made - Suspended Effective</td></tr> <tr> <td>T01</td><td>Terminated - Recipient Deceased - Non-payment In</td></tr> <tr> <td>T20</td><td>Terminated - Duplicate Record Effective</td></tr> <tr> <td>T22</td><td>Terminated - Duplicate Record Effective</td></tr> <tr> <td>T30</td><td>Terminated By DO Effective</td></tr> <tr> <td>T31</td><td>Terminated By System Action Effective</td></tr> <tr> <td>T50</td><td>No Payments Ever Made - Terminated Effective</td></tr> <tr> <td>T51</td><td>No Payments Ever Made - Terminated Effective</td></tr> <tr> <td colspan="2">* These payment types have an effective date following them.</td></tr> </table>	Code	Description	S01	Suspended - Recipient Deceased	S04	Suspended - Disability Decision Pending	S05	Suspended - Disability Decision Pending	S06	Suspended - Address Unknown In	S07	Suspended - Check Returned In	S08	Suspended - Rep Payee Issue Effective	S09	Suspended - Temporary Institutionalization Effective	S10	Suspended - Recipient Refuses Direct Deposit	S20	3 Presumptive Payments Made - Suspended Effective	S21	3 Presumptive Payments Made - Suspended Effective	T01	Terminated - Recipient Deceased - Non-payment In	T20	Terminated - Duplicate Record Effective	T22	Terminated - Duplicate Record Effective	T30	Terminated By DO Effective	T31	Terminated By System Action Effective	T50	No Payments Ever Made - Terminated Effective	T51	No Payments Ever Made - Terminated Effective	* These payment types have an effective date following them.	
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S09	Suspended - Temporary Institutionalization Effective																																						
S10	Suspended - Recipient Refuses Direct Deposit																																						
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T50	No Payments Ever Made - Terminated Effective																																						
T51	No Payments Ever Made - Terminated Effective																																						
* These payment types have an effective date following them.																																							
31	The effective date of the payment status in field 30.																																						
32	<p>Displayed only if disability is a factor. The information displayed will be one of the following:</p> <ul style="list-style-type: none"> <li>• Final Determination - Allowance</li> <li>• Presumptive Finding</li> <li>• Referred To State Agency</li> <li>• State Determination - Allowance</li> <li>• Presumptive Finding - State Conversion Record</li> <li>• No Disability Determination Made</li> <li>• Blank - Disability Does Not Apply</li> </ul>																																						

*Continued on next page*



## Appendix 7A: WTPY Interpretation Guide, Continued

### Title XVI WTPY Fields (continued)

Field	Description																										
33	Indicates whether an essential person exists in the case and the relationship of the essential person to the recipient.																										
	<table> <tr> <th><u>Code</u></th><th><u>Description</u></th></tr> <tr> <td>0</td><td>None</td></tr> <tr> <td>1</td><td>Ineligible spouse is essential person</td></tr> <tr> <td>2</td><td>Living with father is essential person</td></tr> <tr> <td>3</td><td>Living with mother is essential person</td></tr> <tr> <td>4</td><td>Non-relative is in SSN of Eligible Spouse/Parent field</td></tr> <tr> <td>5</td><td>Non-relative is in SSN of Other Parent field</td></tr> <tr> <td>A</td><td>Ineligible spouse and at least one other person are essential persons</td></tr> <tr> <td>B</td><td>Living with father and at least one other person are essential persons</td></tr> <tr> <td>C</td><td>Living with mother and at least one other person are essential persons</td></tr> <tr> <td>D</td><td>There are at least two essential persons, one of whom is in SSN of Eligible Spouse/Parent field</td></tr> <tr> <td>E</td><td>There are at least two essential persons, one of whom is in SSN of Other Parent field</td></tr> <tr> <td>F</td><td>Living with parent is essential person (applicable in pipeline cases only)</td></tr> </table>	<u>Code</u>	<u>Description</u>	0	None	1	Ineligible spouse is essential person	2	Living with father is essential person	3	Living with mother is essential person	4	Non-relative is in SSN of Eligible Spouse/Parent field	5	Non-relative is in SSN of Other Parent field	A	Ineligible spouse and at least one other person are essential persons	B	Living with father and at least one other person are essential persons	C	Living with mother and at least one other person are essential persons	D	There are at least two essential persons, one of whom is in SSN of Eligible Spouse/Parent field	E	There are at least two essential persons, one of whom is in SSN of Other Parent field	F	Living with parent is essential person (applicable in pipeline cases only)
<u>Code</u>	<u>Description</u>																										
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5	Non-relative is in SSN of Other Parent field																										
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E	There are at least two essential persons, one of whom is in SSN of Other Parent field																										
F	Living with parent is essential person (applicable in pipeline cases only)																										
34	Level of appeal.																										
	<table> <tr> <th><u>Code</u></th><th><u>Description</u></th></tr> <tr> <td>H</td><td>Hearing (Level 1 Appeal)</td></tr> <tr> <td>R</td><td>Reconsideration (Level 2 Appeal)</td></tr> <tr> <td>A</td><td>Appeals Council Review (Level 3 Appeal)</td></tr> <tr> <td>C</td><td>Court Case</td></tr> <tr> <td>O</td><td>Class Action</td></tr> </table>	<u>Code</u>	<u>Description</u>	H	Hearing (Level 1 Appeal)	R	Reconsideration (Level 2 Appeal)	A	Appeals Council Review (Level 3 Appeal)	C	Court Case	O	Class Action														
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*Continued on next page*

## Appendix 7A: WTPY Interpretation Guide, Continued

### Title XVI WTPY Fields (continued)

Field	Description																																				
35	Date of the most recent appeal action and the decision.																																				
	<table> <tr> <th><u>Code</u></th><th><u>Description</u></th></tr> <tr> <td>AD</td><td>Dismissed/Abandoned</td></tr> <tr> <td>FA</td><td>Favorable/SSA Appealed</td></tr> <tr> <td>FC</td><td>Fully/Partially Favorable (converted records only)</td></tr> <tr> <td>FF</td><td>Fully Favorable</td></tr> <tr> <td>FN</td><td>Favorable/SSA Not Appealed (court case only)</td></tr> <tr> <td>OT</td><td>Closed: Other</td></tr> <tr> <td>PF</td><td>Partially Favorable</td></tr> <tr> <td>T1</td><td>Dismissed: Claimant Deceased</td></tr> <tr> <td>UA</td><td>Unfavorable/Appealed by Recipient (court case only)</td></tr> <tr> <td>UF</td><td>Unfavorable</td></tr> <tr> <td>UN</td><td>Unfavorable/Not Appealed by Recipient (court case only)</td></tr> <tr> <td>WC</td><td>Dismissed/Withdrawn (converted records only)</td></tr> <tr> <td>WD</td><td>Dismissed: Withdrawn</td></tr> <tr> <td>1D</td><td>Dismissed: Cannot be Appealed</td></tr> <tr> <td>2D</td><td>Dismissed: Filed by Improper Requestor</td></tr> <tr> <td>3D</td><td>Dismissed: Filed Late Without Good Cause</td></tr> <tr> <td>4D</td><td>Dismissed: Withdrawn</td></tr> </table>	<u>Code</u>	<u>Description</u>	AD	Dismissed/Abandoned	FA	Favorable/SSA Appealed	FC	Fully/Partially Favorable (converted records only)	FF	Fully Favorable	FN	Favorable/SSA Not Appealed (court case only)	OT	Closed: Other	PF	Partially Favorable	T1	Dismissed: Claimant Deceased	UA	Unfavorable/Appealed by Recipient (court case only)	UF	Unfavorable	UN	Unfavorable/Not Appealed by Recipient (court case only)	WC	Dismissed/Withdrawn (converted records only)	WD	Dismissed: Withdrawn	1D	Dismissed: Cannot be Appealed	2D	Dismissed: Filed by Improper Requestor	3D	Dismissed: Filed Late Without Good Cause	4D	Dismissed: Withdrawn
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2D	Dismissed: Filed by Improper Requestor																																				
3D	Dismissed: Filed Late Without Good Cause																																				
4D	Dismissed: Withdrawn																																				
36	The date the SSI record was established. If benefits were terminated and reestablished, it is the date of the reestablishment.																																				
37	The source of the death notice. The code may change if the date of death is updated later.																																				
	<table> <tr> <th><u>Code</u></th><th><u>Description</u></th></tr> <tr> <td>1</td><td>SSA DO notification or manual adjustment</td></tr> <tr> <td>2</td><td>Health Insurance (HI) notification</td></tr> <tr> <td>3</td><td>MBR notification</td></tr> <tr> <td>4</td><td>Treasury returned check notification</td></tr> <tr> <td>5</td><td>Returned check from Treasury with no date of death shown (Date of Death field shows the date of the transaction)</td></tr> <tr> <td>6</td><td>State notification</td></tr> </table>	<u>Code</u>	<u>Description</u>	1	SSA DO notification or manual adjustment	2	Health Insurance (HI) notification	3	MBR notification	4	Treasury returned check notification	5	Returned check from Treasury with no date of death shown (Date of Death field shows the date of the transaction)	6	State notification																						
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*Continued on next page*

## Appendix 7A: WTPY Interpretation Guide, Continued

### Title XVI WTPY Fields (continued)

Field	Description																																		
38	<p>The recipient's ethnicity.</p> <table> <tr> <th><u>Code</u></th><th><u>Description</u></th></tr> <tr> <td>A</td><td>Asian</td></tr> <tr> <td>B</td><td>Black</td></tr> <tr> <td>H</td><td>Hispanic</td></tr> <tr> <td>I</td><td>North American Indian</td></tr> <tr> <td>W</td><td>White</td></tr> <tr> <td>O</td><td>Other</td></tr> <tr> <td>U</td><td>Not determined</td></tr> </table>	<u>Code</u>	<u>Description</u>	A	Asian	B	Black	H	Hispanic	I	North American Indian	W	White	O	Other	U	Not determined																		
<u>Code</u>	<u>Description</u>																																		
A	Asian																																		
B	Black																																		
H	Hispanic																																		
I	North American Indian																																		
W	White																																		
O	Other																																		
U	Not determined																																		
39	Another name used by the recipient.																																		
40	<p>Indicates whether the recipient owns any of the property listed. The following codes may appear:</p> <table> <tr> <th><u>Code</u></th><th><u>Description</u></th></tr> <tr> <td colspan="2"><u>Home</u></td></tr> <tr> <td>A</td><td>Possession of a home - principal place of residence</td></tr> <tr> <td>S</td><td>Equity in non-excludable property is expected to increase in value</td></tr> <tr> <td>T</td><td>Home and equity in non-excludable property</td></tr> <tr> <td>Z</td><td>None</td></tr> <tr> <td>Blank</td><td>Not determined</td></tr> <tr> <td colspan="2"><u>Vehicle</u></td></tr> <tr> <td>B</td><td>Vehicle - either over or under limit</td></tr> <tr> <td>K</td><td>Individual required to dispose of vehicle</td></tr> <tr> <td>Z</td><td>None</td></tr> <tr> <td>Blank</td><td>Not determined</td></tr> <tr> <td colspan="2"><u>Life Insurance</u></td></tr> <tr> <td>C</td><td>Life insurance - face value over \$1,500</td></tr> <tr> <td>L</td><td>Individual required to dispose life insurance</td></tr> <tr> <td>Z</td><td>None</td></tr> <tr> <td>Blank</td><td>Not determined</td></tr> </table>	<u>Code</u>	<u>Description</u>	<u>Home</u>		A	Possession of a home - principal place of residence	S	Equity in non-excludable property is expected to increase in value	T	Home and equity in non-excludable property	Z	None	Blank	Not determined	<u>Vehicle</u>		B	Vehicle - either over or under limit	K	Individual required to dispose of vehicle	Z	None	Blank	Not determined	<u>Life Insurance</u>		C	Life insurance - face value over \$1,500	L	Individual required to dispose life insurance	Z	None	Blank	Not determined
<u>Code</u>	<u>Description</u>																																		
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*Continued on next page*

## Appendix 7A: WTPY Interpretation Guide, Continued

### Title XVI WTPY Fields (continued)

Field	Description																																						
40 (cont.)	<table> <tr> <th><u>Code</u></th><th><u>Description</u></th></tr> <tr> <td colspan="2"><u>Property</u></td></tr> <tr> <td>D</td><td>Income producing property under or over limit</td></tr> <tr> <td>M</td><td>Individual required to dispose of income producing property</td></tr> <tr> <td>Z</td><td>None</td></tr> <tr> <td>Blank</td><td>Not determined</td></tr> <tr> <td colspan="2"><u>Other</u></td></tr> <tr> <td>E</td><td>Other resources over limit</td></tr> <tr> <td>N</td><td>Individual required to dispose of other resources</td></tr> <tr> <td>Z</td><td>None</td></tr> <tr> <td>Blank</td><td>Not determined</td></tr> </table>	<u>Code</u>	<u>Description</u>	<u>Property</u>		D	Income producing property under or over limit	M	Individual required to dispose of income producing property	Z	None	Blank	Not determined	<u>Other</u>		E	Other resources over limit	N	Individual required to dispose of other resources	Z	None	Blank	Not determined																
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E	Other resources over limit																																						
N	Individual required to dispose of other resources																																						
Z	None																																						
Blank	Not determined																																						
41	Date of the most current period of eligibility or referral for Medicaid.																																						
42	<p>The country where the recipient was born.</p> <table> <tr> <th><u>Code</u></th><th><u>Country</u></th></tr> <tr><td>AF</td><td>Afghanistan</td></tr> <tr><td>AL</td><td>Albania</td></tr> <tr><td>AG</td><td>Algeria</td></tr> <tr><td>AQ</td><td>American Samoa</td></tr> <tr><td>AN</td><td>Andorra</td></tr> <tr><td>AO</td><td>Angola</td></tr> <tr><td>AV</td><td>Anguilla</td></tr> <tr><td>AY</td><td>Antarctica</td></tr> <tr><td>AC</td><td>Antigua and Barbuda</td></tr> <tr><td>AR</td><td>Argentina</td></tr> <tr><td>AM</td><td>Armenia</td></tr> <tr><td>AA</td><td>Aruba</td></tr> <tr><td>AT</td><td>Ashmore and Cartier Islands</td></tr> <tr><td>AS</td><td>Australia</td></tr> <tr><td>AU</td><td>Austria</td></tr> <tr><td>AJ</td><td>Azerbaijan</td></tr> <tr><td>BF</td><td>Bahamas, The</td></tr> <tr><td>BA</td><td>Bahrain</td></tr> </table>	<u>Code</u>	<u>Country</u>	AF	Afghanistan	AL	Albania	AG	Algeria	AQ	American Samoa	AN	Andorra	AO	Angola	AV	Anguilla	AY	Antarctica	AC	Antigua and Barbuda	AR	Argentina	AM	Armenia	AA	Aruba	AT	Ashmore and Cartier Islands	AS	Australia	AU	Austria	AJ	Azerbaijan	BF	Bahamas, The	BA	Bahrain
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AT	Ashmore and Cartier Islands																																						
AS	Australia																																						
AU	Austria																																						
AJ	Azerbaijan																																						
BF	Bahamas, The																																						
BA	Bahrain																																						

*Continued on next page*

## Appendix 7A: WTPY Interpretation Guide, Continued

### Title XVI WTPY Fields (continued)

Field	Description	
42 (cont.)	<u>Code</u>	<u>Country</u>
	FQ	Baker Island
	BG	Bangladesh
	BB	Barbados
	BS	Bassas Da India
	BO	Belarus
	BE	Belgium
	BH	Belize
	BN	Benin
	BD	Bermuda
	BT	Bhutan
	BL	Bolivia
	BK	Bosnia and Herzegovina
	BC	Botswana
	BV	Bouvet Island
	BR	Brazil
	IO	British Indian Ocean Territory
	VI	British Virgin Islands
	BX	Brunei
	BU	Bulgaria
	UV	Burkina
	BM	Burma
	BY	Burundi
	CB	Cambodia
	CM	Cameroon
	CA	Canada
	CV	Cape Verde
	CJ	Cayman Islands
	CT	Central African Republic
	CD	Chad
	CI	Chile
	CH	China
	KT	Christmas Island
	IP	Clipperton Island
	CK	Cocos (Keeling) Islands
	CO	Colombia
	CN	Comoros
	CF	Congo

*Continued on next page*

## Appendix 7A: WTPY Interpretation Guide, Continued

### Title XVI WTPY Fields (continued)

Field	Description	
42 (cont.)	<u>Code</u>	<u>Country</u>
	CW	Cook Islands
	CR	Coral Sea Islands
	CS	Costa Rica
	IV	Cote D'ivoire
	HR	Croatia
	CU	Cuba
	CY	Cyprus
	EZ	Czech Republic
	DA	Denmark
	DJ	Djibouti
	DO	Dominica
	DR	Dominican Republic
	EC	Ecuador
	EG	Egypt
	ES	El Salvador
	EK	Equatorial Guinea
	ER	Eritrea
	EN	Estonia
	ET	Ethiopia
	EU	Europa Island
	FK	Falkland Islands (Islas Malvinas)
	FO	Faroe Islands
	FM	Federated States Of Micronesia
	FJ	Fiji
	FI	Finland
	FR	France
	FG	French Guiana
	FP	French Polynesia
	FS	French Southern and Antarctic Lands
	GB	Gabon
	GA	Gambia, The
	GZ	Gaza Strip
	GG	Georgia
	GM	Germany
	GH	Ghana
	GI	Gibraltar

*Continued on next page*

## Appendix 7A: WTPY Interpretation Guide, Continued

### Title XVI WTPY Fields (continued)

Field	Description	
42 (cont.)	<u>Code</u>	<u>Country</u>
	GO	Glorioso Islands
	GR	Greece
	GL	Greenland
	GJ	Grenada
	GP	Guadeloupe
	GQ	Guam
	GT	Guatemala
	GK	Guernsey
	GV	Guinea
	PU	Guinea-Bissau
	GY	Guyana
	HA	Haiti
	HM	Heard Island and McDonald Islands
	HO	Honduras
	HK	Hong Kong
	HQ	Howland Island
	HU	Hungary
	IC	Iceland
	IN	India
	ID	Indonesia
	IR	Iran
	IZ	Iraq
	EI	Ireland
	IS	Israel
	IT	Italy
	JM	Jamaica
	JN	Jan Mayen
	JA	Japan
	DQ	Jarvis Island
	JE	Jersey
	JQ	Johnston Atoll
	JO	Jordan
	JU	Juan De Nova Island
	KZ	Kazakhstan
	KE	Kenya
	KQ	Kingman Reef
	KR	Kiribati

*Continued on next page*

## Appendix 7A: WTPY Interpretation Guide, Continued

### Title XVI WTPY Fields (continued)

Field	Description	
42 (cont.)	<u>Code</u>	<u>Country</u>
	KN	Korea, Democratic People's Republic Of
	KS	Korea, Republic Of
	KU	Kuwait
	KG	Kyrgyzstan
	LA	Laos
	LG	Latvia
	LE	Lebanon
	LT	Lesotho
	LI	Liberia
	LY	Libya
	LS	Liechtenstein
	LH	Lithuania
	LU	Luxembourg
	MC	Macau
	MK	Macedonia
	MA	Madagascar
	MI	Malawi
	MY	Malaysia
	MV	Maldives
	ML	Mali
	MT	Malta
	IM	Man, Isle Of
	RM	Marshall Islands
	MB	Martinique
	MR	Mauritania
	MP	Mauritius
	MF	Mayotte
	MX	Mexico
	MQ	Midway Islands
	MD	Moldova
	MN	Monaco
	MG	Mongolia
	MW	Montenegro
	MH	Montserrat
	MO	Morocco
	MZ	Mozambique

*Continued on next page*



## Appendix 7A: WTPY Interpretation Guide, Continued

### Title XVI WTPY Fields (continued)

Field	Description	
42 (cont.)	<u>Code</u>	<u>Country</u>
	WA	Namibia
	NR	Nauru
	BQ	Navassa Island
	NP	Nepal
	NL	Netherlands
	NT	Netherlands Antilles
	NC	New Caledonia
	NZ	New Zealand
	NU	Nicaragua
	NG	Niger
	NI	Nigeria
	NE	Niue
	NF	Norfolk Island
	CQ	Northern Mariana Islands
	NO	Norway
	MU	Oman
	PK	Pakistan
	LQ	Palmyra Atoll
	PM	Panama
	PP	Papua New Guinea
	PF	Paracel Islands
	PA	Paraguay
	PE	Peru
	RP	Philippines
	PC	Pitcairn Islands
	PL	Poland
	PO	Portugal
	RQ	Puerto Rico
	QA	Qatar
	RE	Reunion
	RO	Romania
	RS	Russia
	RW	Rwanda
	SC	St. Kitts and Nevis
	SH	St. Helena
	ST	St. Lucia
	SB	St. Pierre and Miquelon

*Continued on next page*

## Appendix 7A: WTPY Interpretation Guide, Continued

### Title XVI WTPY Fields (continued)

Field	Description	
42 (cont.)	<u>Code</u>	<u>Country</u>
	VC	St. Vincent and The Grenadines
	SM	San Marino
	TP	Sao Tome and Principe
	SA	Saudi Arabia
	SG	Senegal
	SR	Serbia
	SE	Seychelles
	SL	Sierra Leone
	SN	Singapore
	LO	Slovakia
	SI	Slovenia
	BP	Solomon Islands
	SO	Somalia
	SF	South Africa
	SX	South Georgia and The South Sandwich Islands
	SP	Spain
	PG	Spratly Islands
	CE	Sri Lanka
	SU	Sudan
	NS	Suriname
	SV	Svalbard
	WZ	Swaziland
	SW	Sweden
	SZ	Switzerland
	SY	Syria
	TW	Taiwan
	TI	Tajikistan
	TZ	Tanzania
	TH	Thailand
	TO	Togo
	TL	Tokelau
	TN	Tonga
	TD	Trinidad and Tobago
	TE	Tromelin Island
	PS	Trust Territory Of The Pacific Islands (Palau)
	TS	Tunisia
	TU	Turkey

*Continued on next page*

## Appendix 7A: WTPY Interpretation Guide, Continued

### Title XVI WTPY Fields (continued)

Field	Description	
42 (cont.)	<u>Code</u>	<u>Country</u>
	TX	Turkmenistan
	TK	Turks and Caicos Islands
	TV	Tuvalu
	UG	Uganda
	UP	Ukraine
	TC	United Arab Emirates
	UK	United Kingdom
	US	United States
	UY	Uruguay
	UZ	Uzbekistan
	NH	Vanuatu
	VT	Vatican City
	VE	Venezuela
	VM	Vietnam
	VQ	Virgin Islands
	WQ	Wake Island
	WF	Wallis and Futuna
	WE	West Bank
	WI	Western Sahara
	WS	Western Samoa
	YM	Yemen
	CG	Zaire
	ZA	Zambia
	ZI	Zimbabwe
43	The recipient's telephone number.	
44	Indicates whether there is other health insurance (third party liability). This is not updated after initial posting. If the insurance has since been terminated, the termination date is not listed.	
	<u>Code</u>	<u>Description</u>
	Y	Third party liability does exist and applicant agrees to assign rights
	A	Third party liability does exist but applicant refuses to assign rights
	R	Failure to cooperate in providing third party liability data
	N	Third party liability does not exist
	Q	Medicaid qualifying trust may exist
	Blank	Not applicable

*Continued on next page*

## Appendix 7A: WTPY Interpretation Guide, Continued

### Title XVI WTPY Fields (continued)

Field	Description								
45	<p>Indicates whether the recipient incurred any medical expenses during the 3 month retroactive period which remain unpaid (not updated after initial posting).</p> <table> <tr> <th><u>Code</u></th><th><u>Description</u></th></tr> <tr> <td>Y</td><td>Unpaid bills do exist</td></tr> <tr> <td>N</td><td>Unpaid bills do not exist</td></tr> <tr> <td>Blank</td><td>Not applicable</td></tr> </table>	<u>Code</u>	<u>Description</u>	Y	Unpaid bills do exist	N	Unpaid bills do not exist	Blank	Not applicable
<u>Code</u>	<u>Description</u>								
Y	Unpaid bills do exist								
N	Unpaid bills do not exist								
Blank	Not applicable								
46	<p>The reason an applicant was initially denied for SSI.</p> <table> <tr> <th><u>Code</u></th><th><u>Description</u></th></tr> <tr> <td>N__</td><td>For definitions of codes after the "N", refer to Payment Status code field</td></tr> <tr> <td>Blank</td><td>Not initially denied</td></tr> </table>	<u>Code</u>	<u>Description</u>	N__	For definitions of codes after the "N", refer to Payment Status code field	Blank	Not initially denied		
<u>Code</u>	<u>Description</u>								
N__	For definitions of codes after the "N", refer to Payment Status code field								
Blank	Not initially denied								
47	The date the applicant was denied SSI benefits and/or State supplementation. This date may be before the Record Processing Date, the Last Transaction Date, and the Record Establishment Date because SSA's system applies it as soon as it is transmitted.								
48	<p>The date of disability onset alleged by the applicant during the period in which the case is awaiting a medical determination, or in the case of a medical denial. After a final disability/blindness allowance, the date of onset displayed is either:</p> <ul style="list-style-type: none"> <li>• Date of disability onset established for Title II purpose in concurrent Title II/Title XVI allowance; or</li> <li>• Date of onset established for Title XVI only medical allowances. This date is no earlier than the effective month of the SSI application unless information in the medical file supports an earlier date.</li> </ul>								
49	The month and year of the initial Food Stamp data.								
50	<p>Indicates whether SSA personnel took an application for food stamps.</p> <table> <tr> <th><u>Code</u></th><th><u>Description</u></th></tr> <tr> <td>Y</td><td>Yes</td></tr> <tr> <td>N</td><td>No</td></tr> <tr> <td>Blank</td><td>No input</td></tr> </table>	<u>Code</u>	<u>Description</u>	Y	Yes	N	No	Blank	No input
<u>Code</u>	<u>Description</u>								
Y	Yes								
N	No								
Blank	No input								

*Continued on next page*

## Appendix 7A: WTPY Interpretation Guide, Continued

### Title XVI WTPY Fields (continued)

Field	Description																												
51	<p>Indicates whether the recipient currently receives Food Stamps or has filed an application for Food Stamps in the past 60 days on which no decision has been made.</p> <table> <tr> <th><u>Code</u></th><th><u>Description</u></th></tr> <tr> <td>Y</td><td>Yes</td></tr> <tr> <td>N</td><td>No</td></tr> <tr> <td>Blank</td><td>No input</td></tr> </table>	<u>Code</u>	<u>Description</u>	Y	Yes	N	No	Blank	No input																				
<u>Code</u>	<u>Description</u>																												
Y	Yes																												
N	No																												
Blank	No input																												
52	<p>Indicates if the SSI monthly assistance amount reflects an overpayment and/or underpayment.</p> <table> <tr> <th><u>Code</u></th><th><u>Description</u></th></tr> <tr> <td>O</td><td>Overpayment</td></tr> <tr> <td>U</td><td>Underpayment</td></tr> <tr> <td>B</td><td>Both overpayment and underpayment exist</td></tr> </table>	<u>Code</u>	<u>Description</u>	O	Overpayment	U	Underpayment	B	Both overpayment and underpayment exist																				
<u>Code</u>	<u>Description</u>																												
O	Overpayment																												
U	Underpayment																												
B	Both overpayment and underpayment exist																												
53	<p>The type of unearned income that the recipient is or was receiving. The last three occurrences of type A (Social Security) income appears. The most recent payment is displayed first, followed by earlier payments in reverse chronological order. All other types of unearned income reflect the most recent occurrence.</p> <table> <tr> <th><u>Code</u></th><th><u>Description</u></th></tr> <tr> <td>A</td><td>Social Security</td></tr> <tr> <td>B</td><td>Black Lung</td></tr> <tr> <td>C</td><td>Veterans Administration compensation (not based on need)</td></tr> <tr> <td>D</td><td>Railroad Retirement Board (RRB)</td></tr> <tr> <td>E</td><td>Veterans Administration pension (based on need)</td></tr> <tr> <td>F</td><td>Assistance based on need and not excluded from unearned income</td></tr> <tr> <td>G</td><td>Retroactive Title II benefits posted as if paid when due</td></tr> <tr> <td>H</td><td>Income in-kind (support and maintenance)</td></tr> <tr> <td>I</td><td>Ineligible child allocation</td></tr> <tr> <td>J</td><td>Value of the one-third reduction</td></tr> <tr> <td>K</td><td>Blind countable income</td></tr> <tr> <td>L</td><td>Military pension</td></tr> <tr> <td>M</td><td>Federal Civil Service pension</td></tr> </table>	<u>Code</u>	<u>Description</u>	A	Social Security	B	Black Lung	C	Veterans Administration compensation (not based on need)	D	Railroad Retirement Board (RRB)	E	Veterans Administration pension (based on need)	F	Assistance based on need and not excluded from unearned income	G	Retroactive Title II benefits posted as if paid when due	H	Income in-kind (support and maintenance)	I	Ineligible child allocation	J	Value of the one-third reduction	K	Blind countable income	L	Military pension	M	Federal Civil Service pension
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*Continued on next page*

## Appendix 7A: WTPY Interpretation Guide, Continued

### Title XVI WTPY Fields (continued)

Field	Description	
53 (cont.)	<u>Code</u>	<u>Description</u>
	N	Support payments received from absent parent
	O	Income based on need from private sources
	P	Employment related pension (State or local government retirement, private pension)
	Q	Workmen's Compensation
	R	Rents, interest, dividends, royalties
	S	Other
	T	Alaska longevity bonus
	V	Net deemed income (see Deemed Income Amount and Deemed Income Amount (Retrospective) fields)
	W	Retroactive Title II benefits posted as if paid when due
	X*	Minimum income level amount
	Y*	Special needs reduction (applies to a Federal countable MIL)
	Z*	State countable income (Vermont only)
	* Any payment amounts shown with this code do not reflect payments received but are only amounts used by SSA in computing benefits.	
54	Indicates whether the unearned income is verified.	
	<u>Code</u>	<u>Description</u>
	0	Number and income amount not verified
	1	Number verified, amount not verified
	2	Number and income amount verified
	3	VA, OPM, and/or Railroad Retirement amount is the same as the amount shown for the prior month
	4	VA, OPM, and/or Railroad Retirement amount is not the same as the amount shown for the prior month
	5	If type A, number and amount verified If type X, Federal countable MIL transmitted to new record following T30/T50 action
	6	If type A, one-time payment in which there was no pre-existing entry If type X, systems generated MIL to exclude one time Title payments received in first quarter of 1974

*Continued on next page*

## Appendix 7A: WTPY Interpretation Guide, Continued

### Title XVI WTPY Fields (continued)

Field	Description										
54 (cont.)	<table> <tr> <th>Code</th><th>Description</th></tr> <tr> <td>7</td><td>Federal countable MIL systems generated. This is the standard type X income</td></tr> <tr> <td>8</td><td>State countable MIL or income transmitted by FO (applicable to Vermont only)</td></tr> <tr> <td>9</td><td>State countable MIL or income adjusted by the system (applicable to Vermont only)</td></tr> <tr> <td>I</td><td>Identification number and amount verified. Title II being paid in installments</td></tr> </table>	Code	Description	7	Federal countable MIL systems generated. This is the standard type X income	8	State countable MIL or income transmitted by FO (applicable to Vermont only)	9	State countable MIL or income adjusted by the system (applicable to Vermont only)	I	Identification number and amount verified. Title II being paid in installments
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7	Federal countable MIL systems generated. This is the standard type X income										
8	State countable MIL or income transmitted by FO (applicable to Vermont only)										
9	State countable MIL or income adjusted by the system (applicable to Vermont only)										
I	Identification number and amount verified. Title II being paid in installments										
55	The date that the unearned income started if the payment is monthly or the date received if it is a one-time payment.										
56	<p>The effective date of termination of unearned income. In a situation where the unearned income amount changes, this is the last date the previous rate or one-time payment was received.</p> <p><b>NOTE:</b> Year can be "89" on continuing Title II income to indicate payment adjustment in process.</p>										
57	Monthly amount of unearned income received. For unearned income other than Social Security benefits (type A), the amount is always greater than zero. For Type A, the amount is zero when the claim/identification number has a T or M suffix (uninsured beneficiary with health benefits). For suffixes other than T or M, the amount may be zero if the unearned income frequency code is C, N or T. This generally occurs because the recipient is dually entitled but receives only one Title II check. Both claim/identification numbers appear in the record, with a positive money amount for the primary claim number and a zero money amount for the secondary claim number.										

*Continued on next page*

## Appendix 7A: WTPY Interpretation Guide, Continued

### Title XVI WTPY Fields (continued)

Field	Description																														
58	Indicates whether unearned income is being received or was received.  <table> <tr> <th>Code</th><th>Description</th></tr> <tr> <td>C</td><td>Continuous monthly payment, or uninsured (Title II claim number suffix T and M), or Title II benefits in non-pay status</td></tr> <tr> <td>N</td><td>One time payment</td></tr> <tr> <td>T</td><td>Termination of continuous monthly payment</td></tr> <tr> <td>R</td><td>Used with type A income to indicate recent RSDI filing, or with type D income to indicate potential eligibility to a RRB benefit.</td></tr> <tr> <td>U</td><td>Used only in conjunction with a type D entry to indicate RRB has jurisdiction of the Title II payment and that recipient's entitlement to an RRB annuity has not been determined.</td></tr> </table>	Code	Description	C	Continuous monthly payment, or uninsured (Title II claim number suffix T and M), or Title II benefits in non-pay status	N	One time payment	T	Termination of continuous monthly payment	R	Used with type A income to indicate recent RSDI filing, or with type D income to indicate potential eligibility to a RRB benefit.	U	Used only in conjunction with a type D entry to indicate RRB has jurisdiction of the Title II payment and that recipient's entitlement to an RRB annuity has not been determined.																		
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59	The payer's identification number for the recipient.																														
60	Either a Y (yes) or N (no) response to indicate whether a representative payee exists.																														
61	The date the current payee was selected.																														
62	The individual who has physical custody of the recipient.  <table> <tr> <th>Code</th><th>Description</th></tr> <tr> <td>AGY</td><td>Social Agency</td></tr> <tr> <td>CHD</td><td>Natural, adoptive or stepchild (as payee for parent)</td></tr> <tr> <td>ESP</td><td>Essential person is payee</td></tr> <tr> <td>FDM</td><td>Federal mental institution</td></tr> <tr> <td>FDO</td><td>Federal non-mental institution</td></tr> <tr> <td>FIN</td><td>Financial organization</td></tr> <tr> <td>FTH</td><td>Natural or adoptive father</td></tr> <tr> <td>GPR</td><td>Grandparent</td></tr> <tr> <td>MTH</td><td>Natural or adoptive mother</td></tr> <tr> <td>NPM</td><td>Nonprofit mental institution</td></tr> <tr> <td>NPO</td><td>Nonprofit non-mental institution</td></tr> <tr> <td>OFF</td><td>Public Official</td></tr> <tr> <td>OTH</td><td>Other</td></tr> <tr> <td>PRM</td><td>Proprietary mental institution</td></tr> </table>	Code	Description	AGY	Social Agency	CHD	Natural, adoptive or stepchild (as payee for parent)	ESP	Essential person is payee	FDM	Federal mental institution	FDO	Federal non-mental institution	FIN	Financial organization	FTH	Natural or adoptive father	GPR	Grandparent	MTH	Natural or adoptive mother	NPM	Nonprofit mental institution	NPO	Nonprofit non-mental institution	OFF	Public Official	OTH	Other	PRM	Proprietary mental institution
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*Continued on next page*



## Appendix 7A: WTPY Interpretation Guide, Continued

### Title XVI WTPY Fields (continued)

Field	Description	
62 (cont.)	<u>Code</u>	<u>Description</u>
	PRO	Proprietary non-mental institution
	PYE	Payee has custody
	REL	Other relative (includes in-laws)
	RPD	The representative payee is being developed
	SEL	Living by self
	SFT	Stepfather
	SLM	State/local mental institution
	SLO	State/local non-mental institution
	SMT	Stepmother
	SPO	Spouse
63	Identifies the representative payee's status as to legal guardianship and/or the competency of the recipient.	
	<u>Code</u>	<u>Description</u>
	A	Recipient is competent and the payee is the legal guardian
	B	Recipient is competent and there is no legal guardian
	C	Recipient is competent and the legal guardian is someone other than the payee
	D	Recipient is incompetent and the payee is the legal guardian
	E	Recipient is incompetent and there is no legal guardian
	F	Recipient is incompetent and the legal guardian is someone other than the payee
	L	Payee is a financial institution with whom the beneficiary has entered into a living trust agreement
	N	There is no legal guardian
	O	Someone other than the payee is the legal guardian
	Y	Payee is the legal guardian

*Continued on next page*

## Appendix 7A: WTPY Interpretation Guide, Continued

### Title XVI WTPY Fields (continued)

Field	Description																																																				
64	How the payee is related to the recipient.																																																				
	<table> <tr> <th><u>Code</u></th><th><u>Description</u></th></tr> <tr> <td>Blank</td><td>Beneficiary is own payee</td></tr> <tr> <td>AGY</td><td>Social Agency</td></tr> <tr> <td>CHD</td><td>Natural, adoptive or stepchild (as payee for parent)</td></tr> <tr> <td>ESP</td><td>Essential person is payee</td></tr> <tr> <td>FDM</td><td>Federal mental institution</td></tr> <tr> <td>FDO</td><td>Federal non-mental institution</td></tr> <tr> <td>FIN</td><td>Financial organization</td></tr> <tr> <td>FTH</td><td>Natural or adoptive father</td></tr> <tr> <td>GPR</td><td>Grandparent</td></tr> <tr> <td>INP</td><td>Legally incompetent, but no representative payee has been selected</td></tr> <tr> <td>MTH</td><td>Natural or adoptive mother</td></tr> <tr> <td>NPM</td><td>Nonprofit mental institution</td></tr> <tr> <td>NPO</td><td>Nonprofit non-mental institution</td></tr> <tr> <td>OFF</td><td>Public Official</td></tr> <tr> <td>OTH</td><td>Other</td></tr> <tr> <td>PRM</td><td>Proprietary mental institution</td></tr> <tr> <td>PRO</td><td>Proprietary non-mental institution</td></tr> <tr> <td>PYE</td><td>Recipient previously had payee, but is now receiving direct payment</td></tr> <tr> <td>REL</td><td>Other relative (included in-laws)</td></tr> <tr> <td>SEL</td><td>Beneficiary is own payee</td></tr> <tr> <td>SFT</td><td>Stepfather</td></tr> <tr> <td>SLM</td><td>State/local mental institution</td></tr> <tr> <td>SLO</td><td>State/local non-mental institution</td></tr> <tr> <td>SMT</td><td>Stepmother</td></tr> <tr> <td>SPO</td><td>Spouse</td></tr> </table>	<u>Code</u>	<u>Description</u>	Blank	Beneficiary is own payee	AGY	Social Agency	CHD	Natural, adoptive or stepchild (as payee for parent)	ESP	Essential person is payee	FDM	Federal mental institution	FDO	Federal non-mental institution	FIN	Financial organization	FTH	Natural or adoptive father	GPR	Grandparent	INP	Legally incompetent, but no representative payee has been selected	MTH	Natural or adoptive mother	NPM	Nonprofit mental institution	NPO	Nonprofit non-mental institution	OFF	Public Official	OTH	Other	PRM	Proprietary mental institution	PRO	Proprietary non-mental institution	PYE	Recipient previously had payee, but is now receiving direct payment	REL	Other relative (included in-laws)	SEL	Beneficiary is own payee	SFT	Stepfather	SLM	State/local mental institution	SLO	State/local non-mental institution	SMT	Stepmother	SPO	Spouse
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65	Indicates whether advance payment was made. If blank, doesn't apply. If Y, advance payment was made.																																																				
66	The date the emergency advance payment was made to the recipient.																																																				
67	The amount of the emergency advance payment made to the recipient. It is subtracted from the first payment. Advance payments are not removed from the record.																																																				

*Continued on next page*

## Appendix 7A: WTPY Interpretation Guide, Continued

### Title XVI WTPY Fields (continued)

Field	Description
68	Indicates the type of Federal living arrangement (for the current month) of the recipient for Title XVI purposes.  <div> <div>Code</div> <div>Descriptions</div> </div> <div> <div>A</div> <div>Own household</div> </div> <div> <div>B</div> <div>Another's household</div> </div> <div> <div>C</div> <div>Parent's household (child cases only)</div> </div> <div> <div>D</div> <div>Title XIX institution</div> </div> <div> <div>Blank</div> <div>Individual is in a non-title XIX institution, living arrangement change in progress or outside the U.S.</div> </div>
69	Amount of earned income used in computing the payment.
70	Amount of unearned income used in computing the payment.
71	Amount of deemed income used in computing the payment.
72	Interim assistance reimbursement is reimbursement to local governments by Federal governments for benefits provided to SSI applicants while SSA is determining eligibility for SSI. Indicates the timing of SSA reimbursement of State interim assistance payment(s) or the reason for not effecting reimbursement. The assistance reimbursement status code may change (e.g., where reimbursement has been effected or attempted).  <div> <div>Code</div> <div>Description</div> </div> <div> <div>0</div> <div>Essential person record, applicant did not authorize reimbursement, there is no Federal/State agreement for reimbursement</div> </div> <div> <div>1</div> <div>Total amount shown in the SSI monthly assistance amount and the State Supplement Amount fields is being or was sent to State/county</div> </div> <div> <div>2</div> <div>All or part of the amount shown in the SSI Monthly Assistance Amount and the State Supplement Amount fields in current record is being or was sent to the State/county</div> </div> <div> <div>3</div> <div>Reimbursement not effected, applicant ineligible or retroactive payment not due</div> </div> <div> <div>4</div> <div>Reimbursement assistance case pending or denied</div> </div> <div> <div>5</div> <div>Reimbursement check returned</div> </div>

*Continued on next page*

## Appendix 7A: WTPY Interpretation Guide, Continued

### Title XVI WTPY Fields (continued)

Field	Description																																																																
73	Reflects the last change that was made. Shows only one reported event although more than one reportable event may have occurred simultaneously. It is not always updated on spouse records and on actions occurring during various types of cleanup runs.																																																																
	<table> <tr> <th>Code</th><th>Description</th></tr> <tr><td>A1</td><td>Eligible Individual Name Change</td></tr> <tr><td>AD</td><td>Address</td></tr> <tr><td>BC</td><td>Direct Deposit</td></tr> <tr><td>CC</td><td>Folder Involvement Action</td></tr> <tr><td>CG</td><td>Case Characteristics</td></tr> <tr><td>CH</td><td>Returned Check</td></tr> <tr><td>CM</td><td>Multicategories</td></tr> <tr><td>CO</td><td>Overpayment Information</td></tr> <tr><td>CP</td><td>Refund Amount</td></tr> <tr><td>CS</td><td>Decision SGA</td></tr> <tr><td>D1</td><td>Death Notice from DO</td></tr> <tr><td>D3</td><td>Death Notice from MBR Interface</td></tr> <tr><td>D4</td><td>Death Notice from Treasury Notification Process</td></tr> <tr><td>DA</td><td>Diary Code and Date</td></tr> <tr><td>DD</td><td>Direct Deposit Change</td></tr> <tr><td>DL</td><td>Deletion</td></tr> <tr><td>DM</td><td>Deemed income or, if date is 8/74, a special diary selection</td></tr> <tr><td>DN</td><td>Date of Overpayment Notice (obsolete, see ND)</td></tr> <tr><td>DO</td><td>Date of Disability Onset</td></tr> <tr><td>DT</td><td>Drug/Alcohol</td></tr> <tr><td>DY</td><td>Selected for Diary Action</td></tr> <tr><td>EN</td><td>Earned Income</td></tr> <tr><td>EP</td><td>Advance Payment</td></tr> <tr><td>FI</td><td>December 1973 Federal Countable Income</td></tr> <tr><td>FL</td><td>December 1973 Federal Living Arrangement</td></tr> <tr><td>FS</td><td>Food Stamps</td></tr> <tr><td>FV</td><td>Foreign Language Notice</td></tr> <tr><td>GA</td><td>Grant Amount</td></tr> <tr><td>GC</td><td>Goldberg-Kelly Notice Date</td></tr> <tr><td>GF</td><td>Adverse Action</td></tr> <tr><td>GJ</td><td>Protected Payment Level</td></tr> </table>	Code	Description	A1	Eligible Individual Name Change	AD	Address	BC	Direct Deposit	CC	Folder Involvement Action	CG	Case Characteristics	CH	Returned Check	CM	Multicategories	CO	Overpayment Information	CP	Refund Amount	CS	Decision SGA	D1	Death Notice from DO	D3	Death Notice from MBR Interface	D4	Death Notice from Treasury Notification Process	DA	Diary Code and Date	DD	Direct Deposit Change	DL	Deletion	DM	Deemed income or, if date is 8/74, a special diary selection	DN	Date of Overpayment Notice (obsolete, see ND)	DO	Date of Disability Onset	DT	Drug/Alcohol	DY	Selected for Diary Action	EN	Earned Income	EP	Advance Payment	FI	December 1973 Federal Countable Income	FL	December 1973 Federal Living Arrangement	FS	Food Stamps	FV	Foreign Language Notice	GA	Grant Amount	GC	Goldberg-Kelly Notice Date	GF	Adverse Action	GJ	Protected Payment Level
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## Appendix 7A: WTPY Interpretation Guide, Continued

### Title XVI WTPY Fields (continued)

Field	Description	
73 (cont.)	<u>Code</u>	<u>Description</u>
	GM	Minimum Benefit Level
	IC	Initial Claims Accretion
	IF	MBR or SER Interface Reply
	IR	IRS interface select
	JB	Legal Guardian Consular Code
	JC	Legal Guardian Foreign Country
	JD	Legal Guardian Foreign Postal Zone
	JM	Legal Guardian Mailing Address
	JN	Legal Guardian Name
	JP	Legal Guardian Phone Number
	JW	Legal Guardian Foreign Telephone Number
	JZ	Legal Guardian Zip Code
	KM	Authorized Representative Mailing Address
	KN	Authorized Representative Name
	KP	Authorized Representative Telephone Number
	KS	Authorized Representative Fee
	KT	Authorized Representative Type
	KX	Authorized Representative Telephone Extension
	KZ	Authorized Representative Zip Code
	LA	Federal Living Arrangement
	LT	Last Transaction
	M1, M3	Cross Reference Number
	MA	Title II Payment
	MB	MBR Change Other Than Death
	MC	IRS Data
	MD	Medical Data
	MG	Medical Recovery
	MI	Title II IMPACC
	MM	Misused Money
	MP	Manual Payment
	MS	IRS Data
	NC	Non-receipt of Check (Treasury)
	ND	Date of Overpayment Notice
	NM	Accounting Done
	NP	Notice Paragraphs
	NU	NUMIDENT Reply
	OL	MSSICS 4.4 transaction (miscellaneous transaction)

*Continued on next page*

## Appendix 7A: WTPY Interpretation Guide, Continued

### Title XVI WTPY Fields (continued)

Field	Description	
73 (cont.)	<u>Code</u>	<u>Description</u>
	ON	Automated One Time Payment
	PC	SF-1184 or deletion of a returned check
	PL	Appeals Request
	PN	Payee's Name
	PR	Prior Error Input
	PS	Payment Status
	R1-5	Remarks
	RA	Residence Address
	RB	Rollback
	RC	Returned Check for Other Than Death (Treasury)
	RD	Resource Disposal
	RE	Resources
	RF	1619(b) redetermination selection
	RG	Redetermination diary update
	RI	Limited issue redetermination selection
	RP	Representative Payee
	RQ	Unscheduled redetermination
	RR	Remittance Register Refund
	RS	Data Operation Center redetermination second request
	RT	Selected for Redetermination
	RV	Redetermination Pending Indicator Deleted
	RW	Redetermination established on start date record
	RX	Redetermination transfer (high response record)
	RY	Redetermination transfer
	RZ	Redetermination
	SB	Suspend Billing
	SE	Summary Earnings Record Enforcement
	SI	Title XIX Status
	ST	State and County Code
	SZ	Special Action Code
	TL	Telephone Number
	TP	Type of Claim
	TR	Transmission Router
	UC	Unnegotiated Check (Credit)
	UD	Unnegotiated Check (Debit)
	UF	Limited Payability
	UG	Limited Payability

*Continued on next page*

## Appendix 7A: WTPY Interpretation Guide, Continued

### Title XVI WTPY Fields (continued)

Field	Description	
73 (cont.)	<u>Code</u>	<u>Description</u>
	UH	Limited Payability
	UL	Limited Payability
	UM	Unearned Income
	VA	Veterans Administration Interface
	VB	Railroad Retirement Board Interface
	VC	Federal Civil Service Interface
	W	Welfare Number
	WA	Waiver
	X1	Mass address or EIN rep-payee change
	XD	Representative Payee System Direct Deposit
	Z4	IRS interface reply
	ZC	ZIP Code (residence address)
	ZP	ZIP Code (mailing address)
74	Date of the last transaction.	
75	Identifies any possible additional social security numbers used by the recipient. If more than one SSN is used, resolve the inconsistencies.	
76	The recipient's Medicaid eligibility status.	
	<u>Code</u>	<u>Description</u>
	A	Refused third party liability assignment - referred to State. Federal determination not possible.
	B	Deeming waived. Child under a State home care plan.
	C	Federally administered Medicaid coverage should be continued regardless of payment status code.
	D	Disabled adult child
	G	G/K payment continuation
	P	Drug addiction and/or alcoholism
	Q	Trust fund or similar legal device set up to artificially reduce countable income to become Medicaid eligible may exist
	R	Referred to State for determination, Federal determination not possible
	S	State determination - not SSA responsibility
	W	Widow/widower
	Y	Eligible for Medicaid

*Continued on next page*

## Appendix 7A: WTPY Interpretation Guide, Continued

### Title XVI WTPY Fields (continued)

Field	Description																																
77	Indicates whether the State should consider an individual in payment status NO1, EO1, or PO1 (see field 30) to be an SSI recipient for determining Medicaid eligibility. Codes A, B, and F generate Medicaid Eligibility Code "C." Codes C, D, E, G, H, J, K, L, and M generate Medicaid Eligibility Code "R."																																
	<table> <tr> <th>Code</th><th>Description</th></tr> <tr> <td>A</td><td>Meets countable income test; no data entered for use and insufficiency of earnings test.</td></tr> <tr> <td>B</td><td>Meets countable income test; also meets use and insufficiency of earnings tests.</td></tr> <tr> <td>C</td><td>Meets countable income test; does not meet use test.</td></tr> <tr> <td>D</td><td>Meets countable income test; does not meet insufficiency of earnings test.</td></tr> <tr> <td>E</td><td>Meets countable income test; does not meet use and insufficiency of earnings tests.</td></tr> <tr> <td>F</td><td>Meets countable income test; use and insufficiency of earnings tests decision pending.</td></tr> <tr> <td>G</td><td>Does not meet countable income test; no data entered for use and insufficiency of earnings tests.</td></tr> <tr> <td>H</td><td>Does not meet countable income test; meets use and insufficiency of earnings tests.</td></tr> <tr> <td>J</td><td>Does not meet countable income test; does not meet use test.</td></tr> <tr> <td>K</td><td>Does not meet countable income test; does not meet insufficiency of earnings tests.</td></tr> <tr> <td>L</td><td>Does not meet countable income test; does not meet use or insufficiency of earnings tests.</td></tr> <tr> <td>M</td><td>Does not meet countable income test; use and insufficiency of earnings tests decision pending.</td></tr> <tr> <td>N</td><td>No prerequisite 1611 month available for 1619(b) eligibility (Set by the system).</td></tr> <tr> <td>P</td><td>No prerequisite 1611 month available for 1619(b) eligibility (Set by field office input).</td></tr> <tr> <td>Blank</td><td>Tests for status for title XIX not applicable.</td></tr> </table>	Code	Description	A	Meets countable income test; no data entered for use and insufficiency of earnings test.	B	Meets countable income test; also meets use and insufficiency of earnings tests.	C	Meets countable income test; does not meet use test.	D	Meets countable income test; does not meet insufficiency of earnings test.	E	Meets countable income test; does not meet use and insufficiency of earnings tests.	F	Meets countable income test; use and insufficiency of earnings tests decision pending.	G	Does not meet countable income test; no data entered for use and insufficiency of earnings tests.	H	Does not meet countable income test; meets use and insufficiency of earnings tests.	J	Does not meet countable income test; does not meet use test.	K	Does not meet countable income test; does not meet insufficiency of earnings tests.	L	Does not meet countable income test; does not meet use or insufficiency of earnings tests.	M	Does not meet countable income test; use and insufficiency of earnings tests decision pending.	N	No prerequisite 1611 month available for 1619(b) eligibility (Set by the system).	P	No prerequisite 1611 month available for 1619(b) eligibility (Set by field office input).	Blank	Tests for status for title XIX not applicable.
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## Appendix 7A: WTPY Interpretation Guide, Continued

### 40 Qualifying Quarters Response

Use the following instructions to obtain and interpret the 40 Qualifying Quarters information on the WTPY response.

Step	Action												
1	From the AHCCCS-PMMIS Main Menu, select SVES-WTPY Request/Response (19).												
2	Select Inq Request/Response (Option 1)												
3	<p>The last column on the right is “40 QQ”. Possible field entries are as follows:</p> <table border="1"> <thead> <tr> <th>Entry</th><th>Definition</th></tr> </thead> <tbody> <tr> <td>88</td><td>QQ data follows</td></tr> <tr> <td>01</td><td>Earnings record not found</td></tr> <tr> <td>02</td><td>SSA system error – Please resubmit request</td></tr> <tr> <td>99</td><td>Record cannot be process – contact the SSA Regional Office</td></tr> <tr> <td>(Blank)</td><td>Qualifying quarter information was not requested.</td></tr> </tbody> </table>	Entry	Definition	88	QQ data follows	01	Earnings record not found	02	SSA system error – Please resubmit request	99	Record cannot be process – contact the SSA Regional Office	(Blank)	Qualifying quarter information was not requested.
Entry	Definition												
88	QQ data follows												
01	Earnings record not found												
02	SSA system error – Please resubmit request												
99	Record cannot be process – contact the SSA Regional Office												
(Blank)	Qualifying quarter information was not requested.												
4	To view the response for a specific individual, enter “S” in the SEL column and press enter.												
5	<p>The 40 QQ Information screen (SV050) displays the qualifying quarters earned by the individual since 1985.</p> <ul style="list-style-type: none"> <li>• There are four fields in the QTR column for each year.</li> <li>• Each “1” in a QTR field represents a qualifying quarter earned by the individual.</li> <li>• The individual may have a maximum of four “1’s” or four qualifying quarters for each year.</li> </ul> <p>The SV050 screen does not display a total. Count the number of “1’s” to determine the number of qualifying quarters earned by the individual.</p>												
6	<p>Return to MS 706.4 for instructions on how to:</p> <ul style="list-style-type: none"> <li>• Calculate the number of qualifying quarters that can be credited from the customer’s spouse and/or parent(s); and</li> <li>• Determine the customer’s total qualifying quarters.</li> </ul> <p>NOTE: Information about recently earned qualifying quarters may not appear on the WTPY response. Follow the policy in MS 706.04.G to verify lag quarters if the documentation provided on the WTPY responses for the customer and relatives (if applicable) does not equal 40 qualifying quarters.</p>												

*Continued on next page*

## Appendix 7A: WTPY Interpretation Guide, Continued

### BIC Codes

The Beneficiary Identification Code (BIC) is the 1 to 3 digits after the social security number. BIC codes are listed below.

Request Code	Display Code	Type	Identification
A00	A	Primary Wage Earner	Retirement or disability
B00	B	Aged Wife	First claimant
B01	B1	Aged Husband	First claimant
B02	B2	Young Wife, with a child in her care	First claimant
B03	B3	Aged Wife	Second claimant
B04	B4	Aged Husband	Second claimant
B05	B5	Young Wife	Second claimant
B06	B6	Divorced Wife, age 62 or over	First claimant
B07	B7	Young Wife	Third claimant
B08	B8	Aged Wife	Third claimant
B09	B9	Divorced Wife, age 62 or over	Second claimant
B10	BA	Aged Wife	Fourth claimant
B13	BD	Aged Wife	Fifth claimant
B16	BG	Aged Husband	Third claimant
B17	BH	Aged Husband	Fourth claimant
B19	BJ	Aged Husband	Fifth claimant
B20	BK	Young Wife	Fourth claimant
B21	BL	Young Wife	Fifth claimant
B23	BN	Divorced Wife, age 62 or over	Third claimant
B25	BP	Divorced Wife, age 62 or over	Fourth claimant
B26	BQ	Divorced Wife, age 62 or over	Fifth claimant
B27	BR	Divorced Husband, age 62 or over	First claimant
B29	BT	Divorced Husband, age 62 or over	Second claimant
B32	BW	Young Husband	Second claimant
B34	BY	Young Husband, with a child in his care	First claimant
C01-C99	C1-C9, CA-CK	Child	Includes disabled or student child
D00	D	Aged Widow, age 60 or over	First claimant
D01	D1	Aged Widower, age 60 or over	First claimant
D02	D2	Aged Widow, age 60 or over	Second claimant
D03	D3	Aged Widower, age 60 or over	Second claimant
D04	D4	Widow (Remarried after attainment of age 60)	First claimant
D05	D5	Aged Widower (Remarried after attainment of age 60)	First claimant
D06	D6	Surviving Divorced Wife, age 60 or over	First claimant
D07	D7	Surviving Divorced Wife, age 60 or over	Second claimant
D08	D8	Aged Widow, age 60 or over	Third claimant
D09	D9	Remarried Widow	Second claimant
D10	DA	Remarried Widow	Third claimant
D12	DC	Surviving Divorced Husband, age 60 or over	First claimant
D13	DD	Aged Widow, age 60 or over	Fourth claimant
D16	DG	Aged Widow, age 60 or over	Fifth claimant
D17	DH	Aged Widower, age 60 or over	Third claimant
D19	DJ	Aged Widower, age 60 or over	Fourth claimant
D20	DK	Aged Widower, age 60 or over	Fifth claimant
D21	DL	Remarried Widow	Fourth claimant
D22	DM	Surviving Divorced Husband	Second claimant

*Continued on next page*

## Appendix 7A: WTPY Interpretation Guide, Continued

### BIC Codes (continued)

Request Code	Display Code	Type	Identification
D23	DN	Remarried Widow	Fifth claimant
D25	DP	Remarried Widower	Second claimant
D26	DQ	Remarried Widower	Third claimant
D27	DR	Remarried Widower	Fourth claimant
D28	DS	Surviving Divorced Husband	Third claimant
D29	DT	Remarried Widower	Fifth claimant
D31	DV	Surviving Divorced Wife, age 60 or over	Third claimant
D32	DW	Surviving Divorced Wife, age 60 or over	Fourth claimant
D33	DX	Surviving Divorced Husband	Fourth claimant
D34	DY	Surviving Divorced Wife, age 60 or over	Fifth claimant
D35	DZ	Surviving Divorced Husband	Fifth claimant
E00	E	Widowed Mother	First claimant
E01	E1	Surviving Divorced Mother	First claimant
E02	E2	Widowed Mother	Second claimant
E03	E3	Surviving Divorced Mother	Second claimant
E04	E4	Widowed Father	First claimant
E05	E5	Surviving Divorced Father (Widower)	First claimant
E06	E6	Widowed Father	Second claimant
E07	E7	Widowed Mother	Third claimant
E08	E8	Widowed Mother	Fourth Claimant
E09	E9	Surviving Divorced Father (Widowed)	Second claimant
E10	EA	Widowed Mother	Fifth claimant
E11	EB	Surviving Divorced Mother	Third claimant
E12	EC	Surviving Divorced Mother	Fourth claimant
E13	ED	Surviving Divorced Mother	Fifth claimant
E15	EF	Widowed Father	Third claimant
E16	EG	Widowed Father	Fourth claimant
E17	EH	Widowed Father	Fifth claimant
E19	EJ	Surviving Divorced Father (Widower)	Third claimant
E20	EK	Surviving Divorced Father (Widower)	Fourth claimant
E22	EM	Surviving Divorced Father (Widower)	Fifth claimant
F01	F1	Father	
F02	F2	Mother	
F03	F3	Stepfather	
F04	F4	Stepmother	
F05	F5	Adopting Father	
F06	F6	Adopting Mother	
F07	F7	Second Alleged Father	
F08	F8	Second Alleged Mother	
J01	J1	Primary Prouty entitled HIB	Less than three quarters of coverage
J02	J2	Primary Prouty entitled to HIB	Over two quarters of coverage
J03	J3	Primary Prouty not entitled to HIB	Less than three quarters of coverage
J04	J4	Primary Prouty not entitled to HIB	Over two quarters of coverage
K01	K1	Prouty wife entitled to HIB	Less than three quarters of coverage
K02	K2	Prouty wife entitled to HIB	Over two quarters of coverage
K03	K3	Prouty wife not entitled to HIB	Less than three quarters of coverage
K04	K4	Prouty wife not entitled to HIB	Over two quarters of coverage
K05	K5	Second Prouty Wife entitled to HIB	Less than three quarters of coverage
K06	K6	Second Prouty Wife entitled to HIB	Over two quarters of coverage

*Continued on next page*

## Appendix 7A: WTPY Interpretation Guide, Continued

### BIC Codes (continued)

Request Code	Display Code	Type	Identification
K07	K7	Second Prouty Wife not entitled to HIB	Less than three quarters of coverage
K08	K8	Second Prouty Wife not entitled to HIB	Over two quarters of coverage
K09	K9	Third Prouty Wife entitled to HIB	Less than three quarters of coverage
K10	KA	Third Prouty Wife entitled to HIB	Over two quarters of coverage
K11	KB	Third Prouty Wife not entitled to HIB	Less than three quarters of coverage
K12	KC	Third Prouty Wife not entitled to HIB	Over two quarters of coverage
K13	KD	Fourth Prouty Wife entitled to HIB	Less than three quarters of coverage
K14	KE	Fourth Prouty Wife entitled to HIB	Over two quarters of coverage
K15	KF	Fourth Prouty Wife not entitled to HIB	Less than three quarters of coverage
K16	KG	Fourth Prouty Wife not entitled to HIB	Over two quarters of coverage
K17	KH	Fifth Prouty Wife entitled to HIB	Less than three quarters of coverage
K19	KJ	Fifth Prouty Wife entitled to HIB	Over two quarters of coverage
K21	KL	Fifth Prouty Wife not entitled to HIB	Less than three quarters of coverage
K22	KM	Fifth Prouty Wife not entitled to HIB	Over two quarters of coverage
M00	M	SMI uninsured beneficiary	Not qualified automatic HIB
M01	M1	SMI uninsured beneficiary	Qualified for automatic HIB but requests only SMIB
T00	T	HI Uninsured Beneficiary	Entitled to HIB under deemed or renal provisions
*TA()	TA	Medicare Qualified Federal Employment (MQFE)	Primary beneficiary
*TB(1,2,6,R,Y)	TB	MQFE Aged Spouse	First claimant
*TC()	TC	MQFE Disabled Adult Child(DAC)	First claimant
*TD(1,4,5,6,C)	TD	MQFE Aged Widow(er)	First claimant
*TE(1,4,5)	TE	MQFE Young Widow(er)	First claimant
*TF(1,3,5,7)	TF	MQFE Parent	Male
*TG(3,4,5,9,T,W)	TG	MQFE Aged Spouse	Second claimant
*TH(7,8,G,N)	TH	MQFE Aged Spouse	Third claimant
*TJ(A,H,P,K)	TJ	MQFE Aged Spouse	Fourth claimant
*TK(D,J,L,Q)	TK	MQFE Aged Spouse	Fifth claimant
*TL(2,3,7,9,M,P)	TL	MQFE Aged Widow(er)	Second claimant
*TM(8,A,H,Q,S,V)	TM	MQFE Aged Widow(er)	Third claimant
*TN(D,J,L,R,W,X)	TN	MQFE Aged Widow(er)	Fourth claimant
*TP(G,K,N,T,Y,Z)	TP	MQFE Aged Widow(er)	Fifth claimant
*TQ(2,4,6,8)	TQ	MQFE Parent	Female
*TR(2,3,6,9)	TR	MQFE Young Widow(er)	Second claimant
*TS(7,B,F,J)	TS	MQFE Young Widow(er)	Third claimant
*TT(8,C,G,K)	TT	MQFE Young Widow(er)	Fourth claimant
*TU(A,D,H,M)	TU	MQFE Young Widow(er)	Fifth claimant
*TV(F,G,J)	TV	MQFE Disabled Widow(er)	Fifth claimant
*TW(1,6,R)	TW	MQFE Disabled Widow(er)	First claimant
*TX(2,3,7,T)	TX	MQFE Disabled Widow(er)	Second claimant
*TY(4,5,8)	TY	MQFE Disabled Widow(er)	Third claimant
*TZ(9,B,C)	TZ	MQFE Disabled Widow(er)	Fourth claimant
T2()-T9()	T2-T9	MQFE(DAC)	2nd to 9th claimant
W00	W	Disabled Widow, age 50 or over	First claimant
W01	W1	Disabled Widower, age 50 or over	First claimant
W02	W2	Disabled Widow, age 50 or over	Second claimant
W03	W3	Disabled Widower, age 50 or over	Second claimant
W04	W4	Disabled Widow, age 50 or over	Third claimant

Continued on next page

## Appendix 7A: WTPY Interpretation Guide, Continued

### BIC Codes (continued)

Request Code	Display Code	Type	Identification
W05	W5	Disabled Widower, age 50 or over	Third claimant
W06	W6	Disabled Surviving Divorced Wife age 50 or over	First claimant
W07	W7	Disabled Surviving Divorced Wife age 50 or over	Second claimant
W08	W8	Disabled Surviving Divorced Wife age 50 or over	Third claimant
W09	W9	Disabled Widow, age 50 or over	Fourth claimant
W11	WB	Disabled Widower, age 50 or over	Fourth claimant
W12	WC	Disabled Surviving Divorced Wife age 50 or over	Fourth claimant
W15	WF	Disabled Widow, age 50 or over	Fifth claimant
W16	WG	Disabled Widower, age 50 or over	Fifth claimant
W19	WJ	Disabled Surviving Divorced Wife	Fifth claimant
W27	WR	Disabled Surviving Divorced Husband	First claimant
W29	WT	Disabled Surviving Divorced Husband	Second claimant

\* These codes may not be used as request codes in the BIC field. If you have to request data on an individual who has one of these claim numbers, use the individual's own SSN without a BIC code to obtain the data.

### Glossary

Listed below is a glossary of terms used by the Social Security Administration.

Term	Definition
Beneficiary	A person who is entitled to Social Security benefits.
BIC	Beneficiary Identification Code. The code that identifies the type of beneficiary receiving benefits.
CAN	Claim Account Number. The number used by SSA to identify an individual who is a claimant or a beneficiary. It consists of a social security number filed by the BIC.
Claimant	The person on whose behalf an application for benefits is filed.
DO	Social Security District Office
Entitlement	The state of meeting the applicable requirements for receipt of benefits, including the filing of an application. Entitlement can be retroactive and thus precede the date of award. A person may be eligible for retroactive benefits before the month of application for benefits. The retroactive period can be 12 months for disabled workers, their spouses and children, and disabled widows and widowers. The maximum retroactive period for other types of beneficiaries is 6 months.

Continued on next page

## Appendix 7A: WTPY Interpretation Guide, Continued

### Glossary (continued)

Term	Definition
FO	Social Security Field Office
HIB	Hospital Insurance Benefits (Medicare Part A)
MBR	Master Beneficiary Record
Payee	A person designated by the Social Security Administration to receive monthly benefits on behalf of a beneficiary when such action appears to be in the beneficiary's best interest. A representative payee is appointed for an adult beneficiary when the beneficiary is physically or mentally incapable of managing his or her own funds. In addition, a payee is usually appointed to receive benefits on behalf of a child under age 18.
Presumptive Eligibility	For certain diagnoses, where there is high probability of a favorable medical determination of disability or blindness, payments may be made for up to 6 months before the formal determination if the applicant meets the other eligibility qualifications.
RRB	Railroad Retirement Board
RSDI	Retirement and Survivor's Disability Insurance (Title II)
SGA	Substantial Gainful Activity
SMI	Supplemental Medical Insurance (Medicare Part B)
SSA	Social Security Administration
SSI	Supplemental Security Income (Title XVI)
SSR	Supplemental Security Income Record
Title II	Federal Old Age, Survivors, and Disability Insurance Benefits (RSDI). Administered by the Social Security Administration, Department of Health and Human Services.
Title XIX	Grants to States for Medical Assistance Programs, administered by the Health Care Financial Administration, Department of Health and Human Services. Medicaid is administered under Title XIX.
Title XVI	Supplemental Security Income (SSI) for the Aged, Blind, and Disabled. Administered by the Social Security Administration, Department of Health and Human Services.
Title XVIII	Health Insurance for the Aged and Disabled. Administration by the Health Care Financial Administration, Department of Health and Human Services. Medicare is administered under Title XVIII.
WTPY	Wire Third Party Query. Verifies Social Security Number and receipt of Social Security, Medicare, and/or SSI benefits.